

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009860

FILED
Apr 29, 2009
Secretary of State

Entity Name: SHROUD OF TURIN PRESERVATION SOCIETY, INC.

Current Principal Place of Business:

19510 SATURNIA LAKES DR.
BOCA RATON, FL 33498 US

New Principal Place of Business:

7235 PROMENADE DR.
J-401
BOCA RATON, FL 33433 US

Current Mailing Address:

19510 SATURNIA LAKES DR.
BOCA RATON, FL 33498 US

New Mailing Address:

7235 PROMENADE DR.
J-401
BOCA RATON, FL 33433 US

FEI Number: 26-1192957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARESTY, MAURICE E
19510 SATURNIA LAKES DR.
BOCA RATON, FL 33498 US

Name and Address of New Registered Agent:

ARESTY, MAURICE E
7235 PROMENADE DR.
J-401
BOCA RATON, FL 33433 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARESTY, MAURICE E
Address: 19510 SATURNIA LAKES DR.
City-St-Zip: BOCA RATON, FL 33498 US

Title: SEC () Delete
Name: ARESTY, MAURICE E
Address: 19510 SATURNIA LAKES DR.
City-St-Zip: BOCA RATON, FL 33498 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARESTY, MAURICE E
Address: 7235 PROMENADE DR.
City-St-Zip: BOCA RATON, FL 33433 US

Title: SEC (X) Change () Addition
Name: ARESTY, MAURICE E
Address: 7235 PROMENADE DR., J-401
City-St-Zip: BOCA RATON, FL 33433 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAURICE ARESTY

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date