

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001050

FILED
Mar 31, 2010
Secretary of State

Entity Name: OLD CATHOLIC CHURCH IN AMERICA, INC.

Current Principal Place of Business:

1156 SW 6TH ST
MIAMI, FL 33130 US

New Principal Place of Business:

Current Mailing Address:

1156 SW 6TH STREET
MIAMI, FL 33130 US

New Mailing Address:

P.O.BOX 351628
MIAMI, FL 33135 US

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARTINEZ, ERICK F T.M.R.
8615 NW 8 ST
304
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: MARTINEZ, ERICK F T.M.R.
Address: 8615 NW 8 ST, APT 304
City-St-Zip: MIAMI, FL 33126 US

Title: VP
Name: SPICER, JOHN J T.M.R.
Address: 341 NW 25 CT
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: S
Name: MORAN, VILMA MS.
Address: 8930 SW 5 ST
City-St-Zip: MIAMI, FL 33174 US

Title: VS
Name: PETZING, WILLIAM R REV.
Address: 341 NW 25 CT
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: T
Name: PIRO, DOMINIC T.M.R.
Address: 341 NW 25 CT
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: VT
Name: LEON, MARINA MS.
Address: 9700 NW 29 AV
City-St-Zip: MIAMI, FL 33147 US

I hereby 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 all other like empowered.

SIGNATURE: ERICK MARTINEZ

REV.

03/31/2010

Electronic Signature of Signing Officer or Director

_____ Date