2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009145

Apr 05, 2010 Secretary of State

Entity Name: SOCIETY OF ST. VINCENT DE PAUL DISTRICT COUNCIL OF CHARLOTTE COUNTY, FLORIDA,

INC

Current Principal Place of Business: New Principal Place of Business:

21505 AUGUSTA AVENUE 3706 CANDIA DRIVE PORT CHARLOTTE, FL 33952 PUNTA GORDA, FL 33950

Current Mailing Address: New Mailing Address:

21505 AUGUSTA AVENUE P.O. BOX 511554
PORT CHARLOTTE, FL 33952 PUNTA GORDA, FL 33951

FEI Number: 37-1566756 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SABATINO, JOSEPH 3706 CANDIA DRIVE

PUNTA GORDA, FL 33950 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: SABATINO, JOSEPH
Address: 3706 CANDIA DR
City-St-Zip: PUNTA GORDA, FL 33950

Title: V

Name: PETERS, RICHARD
Address: 2408 SILVER PALM ROAD
City-St-Zip: NORTH PORT, FL 34288

Title: S

Name: MAGUIRE, ANITA

Address: 19505 QUESADA AVE. A203 City-St-Zip: PORT CHARLOTTE, FL 33948

Title:

 Name:
 THEISEN, LYNETTE S

 Address:
 17171 SPICE LANE

 City-St-Zip:
 PUNTA GORDA, FL 33955

Title: F

 Name:
 NUNES, TARRAH

 Address:
 21225 BASSETT AVENUE

 City-St-Zip:
 PORT CHARLOTTE, FL 33952

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: ANITA MAGUIRE S 04/05/2010