2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08294

Entity Name: VOSE PROPERTIES, INC.

FILED Aug 22, 2005 Secretary of State

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

% DIOCESAN CENTER 9995 N MILITARY TRL PALM BEACH GARDENS, FL 33410

New Mailing Address: Current Mailing Address:

PO BOX 109650

PALM BEACH GARDENS, FL 33410 US

FEI Number: 59-2664150 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FITZGERALD, J PATRICK ESQ. FITZGERALD, J PATRICK ESQ

110 MERRICK WAY 110 MERRICK WAY

SUITE 2-C SUITE 3-B

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 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: 08/22/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

BARBARITO, GERALD M REV Name: Name: Address: 9995 N. MILITARY TRAIL Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip:

Title: VD () Delete Title: VD (X) Change () Addition

Name: MURPHY, RICHARD, Name: MURPHY, RICHARD REV Address: 9995 N MILITARY TRAIL Address: 9995 N MILITARY TRAIL

City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Delete Title: () Change () Addition

NOTABARTOLO, CHARLES E REV Name: Name: 9995 N. MILITARY TRAIL Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip:

Title: () Delete Title: TD () Change (X) Addition

Name: Name: HAMEL, DENIS A MR Address: Address: 9995 N. MILITARY TRAIL

City-St-Zip: City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DENIS A. HAMEL TD 08/22/2005