

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004793

FILED  
Mar 24, 2011  
Secretary of State

**Entity Name:** ST. VINCENT DE PAUL SOCIETY OF INCARNATION PARISH, INC.

**Current Principal Place of Business:**

64 ARBOR OAKS DR.  
SARASOTA, FL 342321753

**New Principal Place of Business:**

2929 BEE RIDGE ROAD  
SARASOTA, FL 34239

**Current Mailing Address:**

64 ARBOR OAKS DR.  
SARASOTA, FL 342321753

**New Mailing Address:**

2929 BEE RIDGE ROAD  
SARASOTA, FL 34239 US

**FEI Number:** 13-5562362

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHEA, FRANCIS B  
64 ARBOR OAKS DR.  
SARASOTA, FL 342321753 US

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

PETERS, JASON M  
2884 SEASONS BLVD  
SARASOTA, FL 34240 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: JASON M. PETERS

03/24/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: PETERS, JASON  
Address: 2884 SEASONS BLVD.  
City-St-Zip: SARASOTA, FL 34240

Title: TD  
Name: MARCONI, JOSEPH  
Address: 4922 HUBER CIR  
City-St-Zip: SARASOTA, FL 34241 US

Title: D  
Name: HARTY, PATRICA  
Address: 3110 ARCH DR.  
City-St-Zip: SARASOTA, FL 34232

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: JASON M. PETERS

DP

03/24/2011

Electronic Signature of Signing Officer or Director

Date