

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13580

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

**Entity Name:** SOCIETY OF ST. VINCENT DE PAUL, DISTRICT COUNCIL OF PASCO, INC.

**Current Principal Place of Business:**

7944 GRAND BLVD.  
PORT RICHEY, FL 34668 US

**New Principal Place of Business:**

**Current Mailing Address:**

7944 GRAND BLVD.  
PORT RICHEY, FL 34668 US

**New Mailing Address:**

**FEI Number:** 59-2905349

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DWYER, PATRICIA A  
7944 GRAND BLVD  
PORT RICHEY, FL 34668 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: DWYER, PATRICIA A  
Address: 5346 WAR ADMIRAL DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: VP  
Name: DODD, EVELYN  
Address: 8521 WINDING WOOD DRIVE  
City-St-Zip: PORT RICHEY, FL 34668 US

Title: T  
Name: JENKINS, MARY LYNN  
Address: 3546 MORGANS BLUFF COURT  
City-St-Zip: LAND O'LAKES, FL 34639 US

Title: S  
Name: TORRES, SUZY  
Address: 1711 AUDUBON TRAIL  
City-St-Zip: LUTZ, FL 33549 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: PATRICIA A. DWYER

PRES

01/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date