2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2010
Secretary of State

DOCUMENT# N15544

Entity Name: THE SALESIAN SISTERS OF TAMPA, INC.

Current Principal Place of Business:

VILLA MADONNA SCHOOL
315 W. COLUMBUS DR.
TAMPA, FL 336021306 US

New Principal Place of Business:

Current Mailing Address:

VILLA MADONNA SCHOOL
315 W. COLUMBUS DR.
TAMPA, FL 336021306 US

New Mailing Address:

FEI Number: 59-1172504 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SALEM, ALBERT M JR.
4600 W. KENNEDY BLVD.
TAMPA, FL 33609 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: PD
Name: NEVES, PHYLLIS
Address: 655 BELMONT AVE.
City-St-Zip: HALEDON, NJ 07508

Title: VPD
Name: GODIN, HELEN
Address: 315 W. COLUMBUS DR
City-St-Zip: TAMPA, FL 33602

Title: D
Name: KERAITIS, KIM
Address: 655 BELMONT AVE.
City-St-Zip: N. HALEDON, NJ 07508

Title: D
Name: PENA, CARMEN
Address: 659 BELMONT AVE
City-St-Zip: HALEDON, NJ 07508

Title: TD
Name: DAUWALTER, SUZANNE
Address: 655 BELMONT AVE.
City-St-Zip: HALEDON, NJ 07508

Title: SD
Name: CEDRONE, ANTOINETTE
Address: 655 BELMONT AVE
City-St-Zip: HALEDON, NJ 07508

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: SR. HELEN GODIN VPD 01/11/2010
Electronic Signature of Signing Officer or Director Date