

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23289

FILED
Feb 12, 2009
Secretary of State

Entity Name: ST. VINCENT DE PAUL SOCIETY OF ST. THOMAS MORE CHURCH, THE CO-CATHEDRAL OF THE
DIOCESE OF PENSACOLA-TALLAHASSEE, INC.

Current Principal Place of Business:

4409 BLOUNTSTOWN HWY
TALLAHASSEE, FL 32304 US

New Principal Place of Business:

Current Mailing Address:

4409 BLOUNTSTOWN HWY
TALLAHASSEE, FL 32304 US

New Mailing Address:

FEI Number: 59-2600031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALL, ALAN
1957 SETTING SUNTRAIL
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

KANE, JULIE
6328 PICKNEY HILL ROAD
TALLAHASSEE, FL 32312 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: JULIE KANE

02/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WALL, ALAN
Address: 1957 SETTING SUNTRAIL
City-St-Zip: TALLAHASSEE, FL 32303

Title: T () Delete
Name: KUECHEL, MARY
Address: 812 PIEDMONT DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP () Delete
Name: EVANS, WAYNE
Address: 5059 CENTENNIAL OAKS CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: P () Delete
Name: MORGAN, DREAMA
Address: 465 TEAL LANE
City-St-Zip: TALLAHASSEE, FL 32308

Title: S () Delete
Name: D'HAESELEER, DORIS
Address: 2113 DEERFIELD ROAD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KANE, JULIE
Address: 6328 PICKNEY HILL ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JULIE KANE

DP

02/12/2009

Electronic Signature of Signing Officer or Director

Date