

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24985

FILED
Jan 04, 2006
Secretary of State

Entity Name: THE HOUSE OF ST. JOSEPH THE WORKMAN, INC.

Current Principal Place of Business:

C/O EVELYN J. MCCARRON
319 RACETRACK RD NE
FT. WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

C/O EVELYN J. MCCARRON
319 RACETRACK RD NE
FT. WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 59-2886544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCARRON, EVELYN J D
319 RACETRACK RD.
FT. WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

MCCARRON, EVELYN J D
214 FLIVA AVE
FT. WALTON BEACH, FL 32548 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: EVELYN J. MCCARRON

01/04/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCCARRON, EVELYN J D
Address: 214 FLIVA AVENUE
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: D () Delete
Name: MCCARRON, THOMAS J VICE D.
Address: 214 FLIVA AVENUE
City-St-Zip: FT. WALTON BEACH, FL

Title: D () Delete
Name: IRLBECK, CATHERINE TREAS.
Address: HIGHWAY 90W
City-St-Zip: DEFUNIAK SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: MCCARRON, THOMAS J VICE D.
Address: 214 FLIVA AVENUE
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: TR. (X) Change () Addition
Name: IRLBECK, CATHERINE TREAS.
Address: 1010 IRLBECK RD
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

I hereby certify that the information supplied with this filing does not qualify for the 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: EVELYN J. MCCARRON

D

01/04/2006

Electronic Signature of Signing Officer or Director

Date