

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Nov 14, 2012
Secretary of State**

DOCUMENT# N28072

Entity Name: DIOCESAN COUNCIL OF ORLANDO, SOCIETY OF ST. VINCENT DE PAUL, INC.**Current Principal Place of Business:**770 S. ORANGE BLOSSOM TRAIL
APOPKA, FL 32703 US**New Principal Place of Business:****Current Mailing Address:**770 S. ORANGE BLOSSOM TRAIL
APOPKA, FL 32703 US**New Mailing Address:**

FEI Number: 59-2948683

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:TRYLKO, TRACE
770 S. ORANGE BLOSSOM TRAIL
APOPKA, FL 32703 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: PRES
Name: ASELTON, LANNY
Address: 627 MULLINS PATH
City-St-Zip: THE VILLIAGES, FL 32159Title: DIR
Name: FAY, WILLIAM H
Address: 2538 STONEVIEW ROAD
City-St-Zip: ORLANDO, FL 32806Title: TREA
Name: KELLY, SUZANNE
Address: 770 S ORANGE BLOSSOM TRAIL
City-St-Zip: APOPKA, FL 32703Title: DIR
Name: HIER, LYNN A
Address: 770 S. ORANGE BLOSSOM TRAIL
City-St-Zip: APOPKA, FL 32703Title: EXDI
Name: TRYLKO, TRACE
Address: 770 S. ORANGE BLOSSOM TRAIL
City-St-Zip: APOPKA, FL 32703Title: 1VP
Name: ORTH, WILLIAM
Address: 34516 PARKVIEW AVE.
City-St-Zip: EUSTIS, FL 32736

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: LYNN A HIER

DIR

11/14/2012

Electronic Signature of Signing Officer or Director

Date