2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2009
Secretary of State

DOCUMENT# N31866

Entity Name: THE CATHOLIC LAWYERS GUILD OF THE DIOCESE OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

1837 HENDRICKS AVENUE
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

1837 HENDRICKS AVENUE
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 59-2945814 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WARREN, G. GLENN
1837 HENDRICKS AVENUE
JACKSONVILLE, FL 32207 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: O ( ) Delete
Name: MORGAN, MICHAEL
Address: 11625 ST. AUGUSTINE RD.
City-St-Zip: JACKSONVILLE, FL

Title: P ( ) Delete
Name: REICHARD, BETHANY
Address: 1 INDEPENDENT DRIVE SUITE 2301
City-St-Zip: JACKSONVILLE, FL 32202

Title: VP ( ) Delete
Name: MARQUINEZ, RODNEY
Address: 3733 UNIVERSITY BLVD., W. # 210B
City-St-Zip: JACKSONVILLE, FL 32217

Title: T ( ) Delete
Name: BROWN, DANIEL
Address: RIVERPLACE TOWER #1818 1301 RIVERPLACE BLV
City-St-Zip: JACKSONVILLE, FL 32207

Title: S ( ) Delete
Name: ONDRIESEK, ELIZABETH
Address: 3333 ATLANTIC BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition
Name: MORGAN, MICHAEL
Address: 11625 ST. AUGUSTINE RD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: P (X) Change ( ) Addition
Name: MARQUINEZ, ROMUALDO
Address: 601 RIVERSIDE AVE. BLDG 5 #14
City-St-Zip: JACKSONVILLE, FL 32204

Title: VP (X) Change ( ) Addition
Name: MCCOY, MICHAEL
Address: 1200 RIVERPLACE BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

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: DANIEL J. BROWN T 05/11/2009
Electronic Signature of Signing Officer or Director — Date