

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33369

FILED
Feb 14, 2006
Secretary of State

Entity Name: THE SAINT LUCIA ISLAND FOUNDATION, INC.

Current Principal Place of Business:

9500 W BAY HARBOR DR
4A
MIAMI, FL 33154 US

New Principal Place of Business:

Current Mailing Address:

9500 W BAY HARBOR DR
4A
MIAMI, FL 33154 US

New Mailing Address:

FEI Number: 65-0160126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENDRICK, DENNIS P PD
9500 W. BAY HARBOR DR.
4A
MIAMI, FL 33154 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 () Delete
Name: KENDRICK, DENNIS P.,
Address: 9500 W. BAY HARBOR DR 4A
City-St-Zip: MIAMI, FL 33154

Title: TD () Delete
Name: MCMANUS, F. SHIELDS,
Address: 5910 SW FORREST GLADE TRAIL
City-St-Zip: HOBE SOUND, FL 33455

Title: CD (X) Delete
Name: FELIX, KELVIN
Address: ARCHDIOCESE OF CASTRIES, PO BOX 267
City-St-Zip: ST LUCIA, W. INDIES,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KENDRICK, DENNIS P PD
Address: 9500 W. BAY HARBOR DR 4A
City-St-Zip: MIAMI, FL 33154 US

Title: TD (X) Change () Addition
Name: MCMANUS, F. SHIELDS TD
Address: 5910 SW FORREST GLADE TRAIL
City-St-Zip: HOBE SOUND, FL 33455 US

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

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: DENNIS P. KENDRICK

PRES

02/14/2006

Electronic Signature of Signing Officer or Director

Date