

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 10, 2009  
Secretary of State**

DOCUMENT# N36289

Entity Name: OUR LADY OF THE ROSARY OLD ROMAN CATHOLIC CHURCH, INC.

**Current Principal Place of Business:**

% REV CHARLES T. BRUSCA  
679 SW 17 CT  
BOCA RATON, FL 33486

**New Principal Place of Business:**

**Current Mailing Address:**

% REV CHARLES T. BRUSCA  
679 SW 17 CT  
BOCA RATON, FL 33486

**New Mailing Address:**

FEI Number: 59-2387861      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRUSCA, CHARLES T. REV  
679 SW 17 CT  
BOCA RATON, FL 33486      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: D      ( ) Delete  
Name: BRUSCA, CHARLES T.,  
Address: 679 SW 17 CT  
City-St-Zip: BOCA RATON, FL

Title: D      ( ) Delete  
Name: STRUTNER, JUDITH  
Address: 5701 CAMINO DEL SOL #305  
City-St-Zip: BOCA RATON, FL 33433

Title: D      ( ) Delete  
Name: LEBBAS, FLORIDA  
Address: 2601 NE 14 CSWY #143  
City-St-Zip: POMPANO BEACH, FL 33062

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D      (X) Change ( ) Addition  
Name: LEBBAD, FLORIDA  
Address: 2601 NE 14 CSWY #143  
City-St-Zip: POMPANO BEACH, FL 33062

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: CHARLES T. BRUSCA

D

03/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date