

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42091

FILED  
Jul 01, 2007  
Secretary of State

Entity Name: ALL SAINTS CATHOLIC MISSION INC.

**Current Principal Place of Business:**

3460 POWERLINE ROAD  
FT. LAUDERDALE, FL 33309 US

**New Principal Place of Business:**

**Current Mailing Address:**

3460 POWERLINE ROAD  
FT. LAUDERDALE, FL 33309

**New Mailing Address:**

FEI Number: 65-0242064      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:**

CAUDILL, ROBERT FATHER  
3460 POWERLINE RD.  
FT. LAUDERDALE, FL 33309 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: VPD ( ) Delete  
Name: COLLINS, CARL  
Address: 821 N.W. 34TH ST.  
City-St-Zip: OAKLAND PARK, FL 33309

Title: SD ( ) Delete  
Name: PARMEN, RICHARD  
Address: 821 N.W. 34TH ST.  
City-St-Zip: OAKLAND PARK, FL 33309

Title: TD (X) Delete  
Name: YANTO, EDDIE  
Address: 821 NW 34TH ST.  
City-St-Zip: OAKLAND, FL 33309

Title: PD ( ) Delete  
Name: CAUDILL, ROBERT FATHER  
Address: 3460 POWERLINE ROAD  
City-St-Zip: FT. LAUDERDALE, FL 33309 US

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

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

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

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

Title: PRES (X) Change ( ) Addition  
Name: CAUDILL, ROBERT FATHER  
Address: 3460 POWERLINE ROAD  
City-St-Zip: FT. LAUDERDALE, FL 33309 US

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: FATHERBOBCAUDILL

PRES

07/01/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date