

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N42091

**FILED**  
**Jan 06, 2010**  
**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 ( )**

**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  
**Name:** COLLINS, CARL  
**Address:** 821 N.W. 34TH ST.  
**City-St-Zip:** OAKLAND PARK, FL 33309

**Title:** SD  
**Name:** HENRY, SHIRLEY  
**Address:** 821 N.W. 34TH ST.  
**City-St-Zip:** OAKLAND PARK, FL 33309

**Title:** PRES  
**Name:** CAUDILL, ROBERT FATHER  
**Address:** 3460 POWERLINE ROAD  
**City-St-Zip:** FT. LAUDERDALE, FL 33309 US

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:** FATHER BOB CAUDILL

PATO

01/06/2010

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

\_\_\_\_\_  
Date