## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N45365

Entity Name: ST. PATRICK'S CHURCH

FILED Feb 28, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
418 NORT	H SAPODILLA LM BEACH, FL	AVENUE	New I III	merpur race or B	usiness.		
Current Mailing Address:				New Mailing Address:			
	H SAPODILLA _M BEACH, FL						
FEI Number: 59-1463631 FEI Number Applied For ( ) FEI N			FEI Number Not Ap	lumber Not Applicable ( ) Certificate of Status Desired ( )			
Name and	Address of C	urrent Registered Agent:	Name ar	nd Address of Ne	w Registered Age	nt:	
1170 BIMIN	S, EDWARD NI LANE EACH, FL 334	404 US					
	named entity s of Florida.	submits this statement for the po	urpose of changing	g its registered offi	ce or registered age	ent, or both,	
SIGNATUR	RE:						
	Electron	ic Signature of Registered Age	nt		Date		
OFFICERS	S AND DIREC	TORS:	ADDITIO	NS/CHANGES T	O OFFICERS AND	DIRECTORS:	
Title: Name: Address: City-St-Zip:	THE HON. EDW 1170 BIMINI LA	Delete //ARD ROGE, RS, SR. NE EACH, FL 33404	Title: Name: Address: City-St-Zip		Change ( ) Addition		
Title: Name: Address: City-St-Zip:	EDWARD, ROD	VOOD PLAZA DR	Title: Name: Address: City-St-Zip	MARSHALL, COR 4969 SABLE PINI	Change ( ) Addition RLIENE MRS. E CIRCLE # 908-C2 ACH, FL 33417 US		
Title: Name: Address: City-St-Zip:	D () CLOUGH, DEBG 705 SW 2ND S' DELRAY BEAC	TREET	Title: Name: Address: City-St-Zip	FOX, DONALD M 794 RYANWOOD			
Title: Name: Address: City-St-Zip:	D () BELK, SAMMIE 450 WEST 35TI RIVIERA BEACI	H STREET	Title: Name: Address: City-St-Zip		Change ( ) Addition		
Title: Name: Address: City-St-Zip:	ELLIS, ESHI M 3717 AUSTRAL		Title: Name: Address: City-St-Zip	( )	Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () MCDONALD, DI 4002 INLET CIF GREENACRES	₹.	Title: Name: Address: City-St-Zip	RHYANT, CATHR 921 43RD. STRE			

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: THE HON. EDWARD ROGERS, SR. SW 02/28/2006