2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45365

Entity Name: ST. PATRICK'S CHURCH

FILED Apr 09, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
	H SAPODILLA A M BEACH, FL							
Current Mailing Address:				New Mailing Address:				
418 NORTH SAPODILLA AVENUE WEST PALM BEACH, FL 33401								
FEI Number:	59-1463631	FEI Number Applied For ()	FEI Num	ber Not Appli	icable ()	Certificate	of Status Desired ()	
Name and Address of Current Registered Agent: N					Name and Address of New Registered Agent:			
MARSHALL, CORLIENE 2541 CANTERBURY DRIVE RIVIERA BEACH, FL 33407 US				MARSHALL, CORLIENE 1505 NORTH MANGONIA DRIVE WEST PALM BEACH, FL 33401 US				
The above in the State		bmits this statement for the pu	irpose of	changing it	s registered of	ffice or reg	istered agent, or both,	
SIGNATURE: CORLIENE MARSHALL					04/09/2008			
	Electronic	Signature of Registered Agen	nt			Da	ate	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	SW () D MARSHALL, COR 2541 CANTERBU RIVIERA BEACH,	RY DRIVE		Title: Name: Address: City-St-Zip:	()	Change ()	Addition	
Title: Name: Address: City-St-Zip:	D () E RODGERS, EDW 1170 BIMINI LAN SINGER ISLAND,	E		Title: Name: Address: City-St-Zip:	D (X) RODGERS, JR, 3824 NORTH SI WEST PALM BE	HORE DRIVE	≣	
Title: Name: Address: City-St-Zip:	MANN, NIGEL 1975 BRANDYWI	Delete INE ROAD APT 303 ACH, FL 33409 US		Title: Name: Address: City-St-Zip:	()	Change ()	Addition	
Title: Name: Address: City-St-Zip:	D () C MCDONALD, MEI 8651 PALOMIND LAKE WORTH, F	DRIVE		Title: Name: Address: City-St-Zip:	()	Change ()	Addition	
Title: Name: Address: City-St-Zip:	D () C FARMER, CORIN 13918-68TH STR WEST PALM BEA	EET NORTH		Title: Name: Address: City-St-Zip:	()	Change ()	Addition	
Title: Name: Address: City-St-Zip:	T () C BRADSHAW, GR 1156-W. 34TH ST RIVIERA BEACH,	reet		Title: Name: Address: City-St-Zip:	()	Change ()	Addition	

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: CORLIENE MARSHALL OFFI 04/09/2008