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May 01 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000001267 (4)
1. Corporation Name
Society of Saint Pius X, Lake Worth, Florida, Inc.

Principal Place of Business	Mailing Address
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2. Principal Place of Business	2a. Mailing Address
21 <i>4827 Coconut Road South</i>	2a <i>4590 SW 65th Avenue</i>
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State <i>Lake Worth, FL</i>	28 City & State <i>Davie, FL</i>
24 Zip <i>33461</i>	29 Zip <i>33314</i>
Country <i>U.S.</i>	Country <i>U.S.</i>

3. Date Incorporated or Qualified <i>03/16/1993</i>	3a. Date of Last Report <i>Feb. 1996</i>
4. FEI Number <i>65-0395005</i>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name <i>Pulvermacher, Carl</i>
82 Street Address (P.O. Box Number is Not Acceptable) <i>4590 SW 65th Ave.</i>
83
84 City <i>Davie</i>
85 State <i>FL</i>
86 Zip Code <i>33314</i>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<i>D Schmidberger, Franz</i>
1.3 STREET ADDRESS	<i>Hotttingergasse 14</i>
1.4 CITY-ST-ZIP	<i>60200 Innsbruck, Austria</i>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<i>D Felley, Bernard</i>
2.3 STREET ADDRESS	<i>CH-6213</i>
2.4 CITY-ST-ZIP	<i>Menzingen, Switzerland</i>
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<i>D/VP Seldany, Arnaud</i>
3.3 STREET ADDRESS	<i>CH-96313</i>
3.4 CITY-ST-ZIP	<i>Menzingen, Switzerland</i>
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	<i>T/D Latsney, Francois</i>
4.3 STREET ADDRESS	<i>CH-6313</i>
4.4 CITY-ST-ZIP	<i>Menzingen, Switzerland</i>
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	<i>D/P Scott, Peter</i>
5.3 STREET ADDRESS	<i>2918 Tracy Avenue</i>
5.4 CITY-ST-ZIP	<i>Kansas City, Mo 64109</i>
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	<i>D/S Beck, Gerard</i>
6.3 STREET ADDRESS	<i>2918 Tracy Avenue</i>
6.4 CITY-ST-ZIP	<i>Kansas City, Mo 64109</i>

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Fr. Gerard J. Beck* - Secretary 4/29/97 816-753-0073
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CFR2E037 (9/96)