

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**May 11 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N93000001267 (4)**  
 1. Corporation Name  
**SOCIETY OF SAINT PIUS X, LAKE WORTH, FLORIDA, IN C.**



Principal Place of Business <b>4827 COCONUT ROAD SOUTH LAKE WORTH FL 33461</b>	Mailing Address <b>4590 S.W. 65TH AVE. DAVE FL 33314 US</b>
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3. Date Incorporated or Qualified <b>03/16/1993</b>	
4. FEI Number <b>65-0395005</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

21. Principal Place of Business	2a. Mailing Address
22. Suite, Apt. #, etc.	26. <b>N SW 28th Avenue</b>
23. City & State	27. <b>#8</b>
24. Zip	28. <b>Boynton Beach</b>
25. Country	29. <b>33426-8003</b>
	30. <b>U.S.</b>

**9. Name and Address of Current Registered Agent**

**PULVERMACHER, CARL  
4590 SW 65TH AVE.  
DAVE FL 33314**

**10. Name and Address of New Registered Agent**

81. Name <b>Mr. Gerard Schreiber</b>	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. <b>406 North O Street</b>	
84. City <b>Lake Worth</b>	85. Zip Code <b>FL 33460</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.0503, 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: *[Signature]* **Mr. Gerard Schreiber, Asst. Treasurer** DATE: **4-27-98**

**12. OFFICERS AND DIRECTORS**

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>SCHIMDBERGER, FRANZ</b>	
STREET ADDRESS	<b>HOTTINGERGASSE 14</b>	
CITY-ST-ZIP	<b>6020 INNSBROCK, AUSTRIA</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>FELLAY, BERNARD</b>	
STREET ADDRESS	<b>CH-6313</b>	
CITY-ST-ZIP	<b>MENZINGEN, SWITZERLAND</b>	
TITLE	<b>D VP</b>	<input type="checkbox"/> DELETE
NAME	<b>SELEGNY, ARNAUD</b>	
STREET ADDRESS	<b>CH-6313</b>	
CITY-ST-ZIP	<b>MENZINGEN, SWITZERLAND</b>	
TITLE	<b>T D</b>	<input type="checkbox"/> DELETE
NAME	<b>LAISNEY, FRANSAIS F</b>	
STREET ADDRESS	<b>CH-6313</b>	
CITY-ST-ZIP	<b>MENZINGEN, SWITZERLAND RI</b>	
TITLE	<b>D P</b>	<input type="checkbox"/> DELETE
NAME	<b>SCOTT, PETER</b>	
STREET ADDRESS	<b>2918 TRACY AVE.</b>	
CITY-ST-ZIP	<b>KANSAS CITY MO 64109</b>	
TITLE	<b>D S</b>	<input type="checkbox"/> DELETE
NAME	<b>BECK, GERARD</b>	
STREET ADDRESS	<b>2918 TRACY AVE.</b>	
CITY-ST-ZIP	<b>KANSAS CITY MO 64109</b>	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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: *[Signature]* **Gerard J. Beck** DATE: **4/23/98** TELEPHONE: **816-753-0073**

CR2E037 (10/97)

**Society of Saint Pius X, Lake Worth, Florida, Inc.**  
DBA Queen of the Holy Rosary Chapel  
1420 SW 28th Avenue, #8  
Boynton Beach, Florida 33426

**Father Gerard J. Beck**  
Secretary

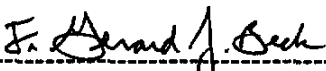
4/23/98

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

**ADDITION TO ANNUAL REPORT 1998**

13. Additions to Officers and Directors in 12

TITLE:	Director
NAME:	Pulvermacher, Carl
STREET ADDRESS:	4590 SW 65th Avenue
CITY, STATE, ZIP:	Davie, FL 33314-4315

  
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Father Gerard J. Beck, Secretary