


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # N93000001267**

1. Entity Name  
**SOCIETY OF SAINT PIUS X, LAKE WORTH, FLORIDA, INC.**



**FILED**  
**04 JAN 28 AM 9:36**  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



01192004 No Chg-NP CR2E037 (10/03) *1/28*

4. FEI Number <b>65-0395005</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

**SCHREIBER, GERARD M**  
**406 NORTH O ST**  
**LAKE WORTH, FL 33460**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

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

<b>Filing Fee is \$61.25 Due by May 1, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	U00000016311 01/28/04-80051-003 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHMIDBERGER, FRANZ CH-6313 MENZINGEN, SWITZERLAND, SW
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FELLAY, BERNARD REV CH-6313 MENZINGEN, SWITZERLAND,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP SELEGNY, ARNAUD FR CH-6313 MENZINGEN, SWITZERLAND, SW
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT EMERIC, BAUDOT FR. CH-6313 MENZINGEN, SWITZERLAND, SW
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P FULLERTON, JOHN D FR. 2918 TRACY AVE. KANSAS CITY, MO 64109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BECK, GERARD J FR 2918 TRACY AVE. KANSAS CITY, MO 64109

**DO NOT WRITE IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Fr. Gerard J. Beck* **Fr. Gerard J. Beck** **01/19/2004 816-753-0073**  
 \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Secretary Date Daytime Phone #

**SOCIETY OF SAINT PIUS X, LAKE WORTH, FLORIDA, INC.  
N93000001267**

**ADDITIONAL DIRECTOR (1)**

**Fr. Carl Pulvermacher**