

03-03-2003 90907 024 \*\*\*\*61.25

**2003 NOT-FOR-PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # N93000001267**  
 1. Entity Name  
**SOCIETY OF SAINT PIUS X, LAKE WORTH,  
 FLORIDA, INC.**



Principal Place of Business      Mailing Address  
**4827 COCONUT ROAD SOUTH      406 NORTH O STREET**  
**LAKE WORTH, FL 33461      LAKE WORTH, FL 33460    US**

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
 City & State      City & State



CHECK HERE IF MAKING CHANGES

4. FEI Number      Applied For  
**65-0395005**      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required  
     

6. Name and Address of Current Registered Agent  
**SCHREIBER, GERARD M**  
**406 NORTH O ST**  
**LAKE WORTH, FL 33460**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

I, the above named entity submit 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 \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when submitting.)

**FILE NOW - FEES \$61.25**       Election Campaign Financing Trust Fund Contribution      \$5.00 May Be Added to Fees       Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: D NAME: SCHMIDBERGER, FRANZ STREET ADDRESS: CH-6313 CITY-ST-ZIP: MENZINGEN, SWITZERLAND, SW	<input type="checkbox"/> Delete	TITLE: D NAME: Fr. Carl Pulvermacher STREET ADDRESS: 4590 SW 6th Avenue CITY-ST-ZIP: Davie, FL 33314-4315	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: FELLAY, BERNARD REV STREET ADDRESS: CH-6313 CITY-ST-ZIP: MENZINGEN, SWITZERLAND,	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: DVP NAME: SELEGNY, ARNAUD FR STREET ADDRESS: CH-6313 CITY-ST-ZIP: MENZINGEN, SWITZERLAND, SW	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: DT NAME: LAISNEY, FRANCOIS FR STREET ADDRESS: CH-6313 CITY-ST-ZIP: MENZINGEN, SWITZERLAND, SW	<input checked="" type="checkbox"/> Delete	TITLE: DT NAME: Fr. Emeric Baudot STREET ADDRESS: CH-6313 CITY-ST-ZIP: Menzingen, SWITZERLAND	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DVP NAME: SCOTT, PETER R FR STREET ADDRESS: 2918 TRACY AVE. CITY-ST-ZIP: KANSAS CITY, MO 64109	<input checked="" type="checkbox"/> Delete	TITLE: DP NAME: Fr. John D. Fullerton STREET ADDRESS: 2918 Tracy Avenue CITY-ST-ZIP: Kansas City, MO 64109	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DS NAME: BECK, GERARD J FR STREET ADDRESS: 2918 TRACY AVE. CITY-ST-ZIP: KANSAS CITY, MO 64109	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	

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 517, 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: *Gerard J Beck* Fr. Gerard J. Beck      02/25/03      816-753-0073  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Daytime Phone #

CRE0307 (10/02)