2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# N93000001716

Entity Name: SACRED HEART CONFERENCE, SOCIETY OF ST. VINCENT DE PAUL, INC.

Current Principal Place of Business:

901 S.W. 6TH ST.
OKEECHOBEE, FL 34974

New Principal Place of Business:

Current Mailing Address:

901 S.W. 6TH ST.
OKEECHOBEE, FL 34974

New Mailing Address:

FEI Number: 59-1841673 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CABANSAY, EDILBERTO Z
2361 SE 27TH STREET
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

CABANSAY, EDILBERTO Z
1003 SE 38TH TERRACE
OKEECHOBEE, FL 34974 US

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.

SIGNATURE: _____ 01/19/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: HARWAS, OLIVER
Address: 2245 SW 3RD. CT.
City-St-Zip: OKEECHOBEE, FL 34974

Title: DV ( ) Delete
Name: CABANSAY, EDILBERTO
Address: 2361 SE 27 ST.
City-St-Zip: OKEECHOBEE, FL 34974

Title: DS ( ) Delete
Name: BLAIR, CATHLEEN
Address: 2365 S.W. 22ND CIRCLE
City-St-Zip: OKEECHOBEE, FL 34974

Title: VT ( ) Delete
Name: CABANSAY, EDILBERTO Z
Address: 2361 NSE 27TH STREET
City-St-Zip: OKEECHOBEE, FL 34974

Title: D ( ) Delete
Name: DUFFY, FR. HUGH
Address: 901 S.W. 6TH ST.
City-St-Zip: OKEECHOBEE, FL 34974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change ( ) Addition
Name: CABANSAY, EDILBERTO
Address: 1003 SE 38TH TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VT (X) Change ( ) Addition
Name: CABANSAY, EDILBERTO Z
Address: 1003 SE 38TH TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: EDILBERTO CABANSAY VT 01/19/2009
Electronic Signature of Signing Officer or Director — Date