

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002141

FILED
Jan 03, 2007
Secretary of State

Entity Name: THE CHRISTIAN BROTHERS (FLORIDA) INSTITUTE, INC.

Current Principal Place of Business:

1702 WEST ERNA DRIVE
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

% VINCENT MCNALLY
33 PRYER TERRACE
NEW ROCHELLE, NY 10804

New Mailing Address:

FEI Number: 65-0526936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENNESSY, PAUL K
10299 SOUTH WEST PEACE RIVER
ARCADIA, FL 34269 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HENNESSY, PAUL K CFC
Address: 10299 SW PEACE RIVER ST
City-St-Zip: ARCADIA, FL 34266

Title: DP () Delete
Name: WALSH, BRIAN CFC
Address: 21 PRYER TERRACE
City-St-Zip: NEW ROCHELLE, NY 10804

Title: DP () Delete
Name: TIMOTHY, BRAY CFC
Address: 21 PRYER TERRACE
City-St-Zip: NEW ROCHELLE, NY 10804

Title: ST () Delete
Name: MCNALLY, VINCENT CFC
Address: 21 PRYER TERRACE
City-St-Zip: NEW ROCHELLE, NY 10804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: VINCENT MCNALLY

ST

01/03/2007

Electronic Signature of Signing Officer or Director

Date