

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002626

FILED
Feb 13, 2008
Secretary of State

Entity Name: RESURRECTION CATHOLIC SCHOOL ENDOWMENT FUND, INC.

Current Principal Place of Business:

3720 OLD HIGHWAY 37
LAKELAND, FL 33813 US

New Principal Place of Business:

Current Mailing Address:

3855 S FLORIDA AVE
LAKELAND, FL 338131109 US

New Mailing Address:

FEI Number: 59-3210586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRITTON, CHARLES P
WENDEL CHRITTON & PARKS, CHARTERED
5300 SOUTH FLORIDA AVENUE
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

ARANDA, ROBERT
VALENTI CAMPBELL TROHN TAMAYO & ARANDA
1701 SOUTH FLORIDA AVENUE
LAKELAND, FL 33803 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: ROBERT ARANDA

02/13/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: CAMPISI, SAL
Address: 5335 WOODHAVEN LN
City-St-Zip: LAKELAND, FL 33813

Title: VT () Delete
Name: CORY, MATTHEW
Address: 325 PALMOLA ST
City-St-Zip: LAKELAND, FL 338032244

Title: T () Delete
Name: WORTMAN, JOSEPH
Address: 5063 WINDOVER LANE
City-St-Zip: LAKELAND, FL

Title: S () Delete
Name: SMITH, CHARLES
Address: 1050 LAKE HOLLINGSWORTH DR
City-St-Zip: LAKELAND, FL 33803

Title: D () Delete
Name: MELLO, MATTHEW G
Address: 3855 S FLORIDA AVE
City-St-Zip: LAKELAND, FL 338131109

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:

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: MATTHEW G. MELLO

D

02/13/2008

Electronic Signature of Signing Officer or Director

Date