

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002895

FILED
Jan 20, 2012
Secretary of State

Entity Name: CATHOLIC CHARITIES OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

1000 W. GARDEN STREET
PENSACOLA, FL 32502 US

New Principal Place of Business:

Current Mailing Address:

1000 W. GARDEN STREET
PENSACOLA, FL 32502 US

New Mailing Address:

FEI Number: 59-3213644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EMMANUEL, ROBERT A
30 SOUTH SPRING STREET
PENSACOLA, FL 32502 US

Name and Address of New Registered Agent:

SPARKS, KIMBERLY
1000 W. GARDEN STREET
PENSACOLA, FL 32502 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: KIMBERLY SPARKS

01/20/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR
Name: EMMANUEL, ROBERT
Address: 30 SOUTH SPRING STREET
City-St-Zip: PENSACOLA, FL 32502

Title: TREA
Name: REMKE, ANDY
Address: 513 WINDROSE CIRCLE
City-St-Zip: PENSACOLA, FL 32507

Title: SEC
Name: KNEE, DALE
Address: 5041 NORTH 12TH AVENUE
City-St-Zip: PENSACOLA, FL 32504

Title: PRES
Name: NEUBAUER, MARGARET
Address: 608 SHORELINE DRIVE
City-St-Zip: PANAMA CITY, FL 32404

Title: VP
Name: CARTER, JANE
Address: 9409 OCTAVIR LANE
City-St-Zip: NAVARRE, FL 32566

I hereby 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 all other like empowered.

SIGNATURE: MARK DUFVA

ED

01/20/2012

Electronic Signature of Signing Officer or Director

Date