FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9500005225 (6)

DIOCESE OF ST. AUGUSTINE, INC.

FILED Jan 27 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address					
11625 OLD ST. AUGUSTINE RD. JACKSONVILLE FL 32258 US		P.O. BOX 24000 JACKSONVILLE FL 32241	P.O. BOX 24000 JACKSONVILLE FL 32241-4000		3. Date Incorporated or Qualified 11/03/1995		
					4. FEI Number 59-0637829	Applied For Not Applicable	
·	2. Principal Place of Business 2a. Mailing				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	- 		6. Election Campaign Financing	\$5.00 May Be	
22 City & State		27 City & State	City & State		7. Is this nonprofit corporation a homeowr	Added to Fees	
23		28	28		Yes No		
Zip 24	Country	Country Zip Cou 25 29 30		ntry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
9, Name and Address of Current Registered Agent			1901		10. Name and Address of New Registere		
81					Name		
Guidi, Dennis e				82 Street Add:	ress (P.O. Box Number is Not Acceptable)		
1837 HENDRICKS AVE. JACKSONVILLE FL 32207				83			
JACASC	INVILLE FL 32201			84 City		- 85 Zip Code	
					F	LIII	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
agent, I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D D	☐ DELETE	1.1 11	į		Change Addition	
NAME	SNYDER, JOHN J	55	1.2 NA	1			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32258	T per ere		Y-ST-ZIP		1 05	
TITLE	D	☐ DELETE	2.1 711			☐ Change ☐ Addition	
NAME	HAUT, VINCENT J	DD	2.2 NA				
STREET ADDRESS	11625 OLD ST. AUGUSTINE	RU.		REET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32258	C SCIET		TY-ST-ZIP		Change Addition	
TITLE	D DDCNMAN VEITU D	☐ DELETE	3.1 117			Change Addition	
NAME	BRENNAN, KEITH R	DD.	3.2 NA			İ	
STREET ADDRESS	LACKSON BULLET EL GOSTO			REET ADDRESS			
CITY-ST-ZIP TITLE	SACKSONVIELE PL 32236	DELETE	4.1 TI	ry-st-zip		Change Addition	
			4.2 N				
NAME OTREET ADDRESS			1	REET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP		☐ DELETE	5.1 TIT	Y-ST-ZIP		Change Addition	
NAME	1		5.2 NA	1			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			
TITLE		DELETE	6.1 TIT			Change Addition	
NAME			6.2 NA			•	
STREET ADDRESS			-,	REET ADDRESS			
City-ST-Zip				Y-ST-ZIP			
2711 31 All		141 At. 1 P. P. L		· · · · · · · · · · · · · · · · · · ·	Cartina 440 07/2VD Florido Ctotutos I furthor		

indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changea, or on an attachment with an address.

CICNATUDE.

BE LEQUKeith R. Brennan

904/262-3200