2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2008
Secretary of State

DOCUMENT# N96000004694

Entity Name: THE UNITED CATHOLIC CHURCH, INC.

Current Principal Place of Business:

51 HILLTOP RD
BETHANY, CT 06524

New Principal Place of Business:

Current Mailing Address:

P O BOX 603
CHESHIRE, CT 06410

New Mailing Address:

FEI Number: 59-3398273 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOWMAN, MARGARET E
1494 PATRIOT DRIVE
MELBOURNE, FL 32940 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:	BOWMAN, MARGARET E	
Address:	1494 PATRIOT DRIVE	
City-St-Zip:	MELBOURNE, FL 32940	
Title:	D	( ) Delete
Name:	BOWMAN, ROBERT M	
Address:	1494 PATRIOT DRIVE	
City-St-Zip:	MELBOURNE, FL 32940	
Title:	D	( ) Delete
Name:	MENTER, WILLIAM G	
Address:	271 DICKINSON ST, SE	
City-St-Zip:	PALM BAY, FL 32907	
Title:	D	( ) Delete
Name:	BURTON, PATRICIA	
Address:	1499 MONTC LAIR	
City-St-Zip:	MEDFORD, OR 97504	
Title:	D	( ) Delete
Name:	TRESSEL, ROSE	
Address:	51 HILLTOP ROAD	
City-St-Zip:	BETHANY, CT 06524	

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: ROSE H TRESSEL D 03/15/2008

Electronic Signature of Signing Officer or Director — Date