

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000001923

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Entity Name:** HOLY APOSTLES CATHOLIC CHARISMATIC CHURCH, INC.

**Current Principal Place of Business:**

1605 PINEHURST RD  
DUNEDIN, FL 34698

**New Principal Place of Business:**

**Current Mailing Address:**

1605 PINEHURST RD  
DUNEDIN, FL 34698

**New Mailing Address:**

**FEI Number:** 31-1511736

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NICOLARD, WILLIAM BISHOP  
1605 PINEHURST RD  
DUNEDIN, FL 34698 US

**Name and Address of New Registered Agent:**

NICOLARD, WILLIAM L REV.  
1605 PINEHURST RD  
DUNEDIN, FL 34698 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: RE. WILLIAM L. NICOLARO

01/11/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: NICOLARO, WILLIAM L PRES.  
Address: 1605 PINEHURST RD  
City-St-Zip: DUNEDIN, FL 34698

Title: VD  
Name: BRYAN, MARK  
Address: 1605 PINEHURST RD  
City-St-Zip: DUNEDIN, FL 34698

Title: SD  
Name: POLING, DIANE M  
Address: 1605 PINEHURST RD  
City-St-Zip: DUNEDIN, FL 34698

Title: TD  
Name: FOREIT, CARMELA  
Address: 1605 PINEHURST RD  
City-St-Zip: DUNEDIN, FL 34698

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: WILLIAM L. NICOLARO

PRES

01/11/2011

Electronic Signature of Signing Officer or Director

Date