

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001755

FILED
Jan 28, 2008
Secretary of State

Entity Name: CATHOLIC COMMUNITY FOUNDATION IN THE ARCHDIOCESE OF MIAMI INC.

Current Principal Place of Business:

9401 BISCAYNE BOULEVARD
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

9401 BISCAYNE BOULEVARD
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 65-0881817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITZGERALD, J P ESQ
110 MERRICK WAY
SUITE 3-B
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

FITZGERALD, PATRICK J ESQ
110 MERRICK WAY
SUITE 3-B
CORAL GABLES, FL 33134 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: J. PATRICK FITZGERALD

01/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BEIER, THOMAS E
Address: 14531 S.W. 74 STREET
City-St-Zip: MIAMI, FL 33183

Title: VCD () Delete
Name: ARAZOZA, MARIA
Address: 9600 S.W. 93 AVENUE
City-St-Zip: MIAMI, FL 33176

Title: PD () Delete
Name: ALONSO-MENDOZA, EMILIO
Address: 9401 BISCAYNE BLVD
City-St-Zip: MIAMI SHORES, FL 33138

Title: VPD () Delete
Name: RODRIGUEZ, L.J.
Address: 9401 BISCAYNE BLVD, STE 505
City-St-Zip: MIAMI SHORES, FL 33138

Title: SD () Delete
Name: CLANCY, SEAN
Address: 20803 BISCAYNE BLVD, STE 505
City-St-Zip: AVENTURA, FL 33180

Title: TD () Delete
Name: O'DOHERTY, JUDE REV
Address: 8081 S.W. 54 COURT
City-St-Zip: MIAMI, FL 331438067

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:

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: L. J. RODRIGUEZ

VPD

01/28/2008

Electronic Signature of Signing Officer or Director

Date