

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005509

FILED
May 01, 2006
Secretary of State

Entity Name: BOY SCOUTS OF AMERICA, TROOP 16, ST. THERESA SCHOOL, INC.

Current Principal Place of Business:

2711 INDIAN MOUND TERRACE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

710 SOUTH DIXIE HWY.
CORAL GABLES, FL 33146

New Mailing Address:

255 UNIVERSITY DRIVE
CORAL GABLES, FL 33134

FEI Number: 65-0866569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ARAN, FERNANDO S
710 SOUTH DIXIE HWY.
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

ARAN, FERNANDO S
255 UNIVERSITY DRIVE
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:

05/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: PARDO, FELIX
Address: 421 CADIMA AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: PSD () Delete
Name: PARDO, CHRISTOPHER
Address: 421 CADIMA AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: VPSD () Delete
Name: PUENTES, NILO
Address: 1220 MARIANA AVE
City-St-Zip: CORAL GABLES, FL 33134

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: FELIX PARDO

CD

05/01/2006

Electronic Signature of Signing Officer or Director

Date