

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90255 048 ****61.25

DOCUMENT # N99000005280 1. Entity Name THE SAINT LEO ABBEY FOUNDATION, INC.					
Principal Place of Business 33601 SR 52 ST LEO, FL 33574			Mailing Address P O 2350 SAINT LEO, FL 33574-2350		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		4. FEI Number 59-3649733
5. Certificate of Status Desired <input type="checkbox"/>					Applied For <input type="checkbox"/> Not Applicable
6. Name and Address of Current Registered Agent ROMFH, PAUL G 33601 SR 52 ST LEO, FL 33574					7. Name and Address of New Registered Agent Name <u>Velten, Robert</u> Street Address (P.O. Box Number is Not Acceptable) <u>33601 SR 52</u> City <u>Saint Leo</u> FL Zip Code <u>33574</u>
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Robert Velten</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<u>Robert Velten, President</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		<u>4-18-07</u> <small>DATE</small>	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KESSELL, SUSAN 12611 ABBEY DR DADE CITY, FL 335258187	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D VELTEN, ROBERT 33601 SR 52 SAINT LEO, FL 33574	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V/D ROMFH, PAUL 33601 SR 52 ST LEO, FL 33574	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/D CAMACHO, ISAAC 33601 SR 52 ST LEO, FL 33574	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T/D AUGUSTIN, FELIX 33601 SR 52 ST LEO, FL 33574	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SOODER, KARL 1209 ROYAL OAK DR WINTER SPRINGS, FL 327084310	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Robert Velten</u>		<u>Robert Velten</u>		<u>4-18-07</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

ATTACHMENT 40077077

#N99000005280

Saint Leo Abbey Foundation

PO Box 2350 • Saint Leo, Florida 33574-2350
(352) 588-8624 • Fax (352) 588-5217 • www.saintleoabbey.org/

Document #N99000005280
The Saint Leo Abbey Foundation, Inc.

FEI Number: 59-3649733

10. Officers and Directors

Title D ☒ Delete
Name Greenfelder, Gail
Street Address 36601 Saint Joe Rd
City-St-Zip Dade City FL 33525-0400

Title D Delete
Name Hoge, James
Street Address 33601 SR 52
City-St-Zip St Leo FL 33574

Title Delete
Name
Street Address
City-St-Zip

Title Delete
Name
Street Address
City-St-Zip

Title Delete
Name
Street Address
City-St-Zip

11. Additions/Changes to Officers and Directors is 10

Title
Name
Street Address
City-St-Zip

Change
Addition

Title
Name
Street Address
City-St-Zip

Change
Addition

Title D
Name Hallett, James
Street Address 33601 SR 52
City-St-Zip St Leo FL 33574

Change
☒ Addition

Title D
Name McKechnie, Bud
Street Address 104 Hickory Tree Road
City-St-Zip Longwood, FL 32750

Change
☒ Addition

Title D
Name Butler, Stephen
Street Address 12630 Tradition Drive
City-St-Zip Dade City, FL 33525

Change
☒ Addition

Signature: Robert Velten Robert Velten 4-18-07
Signature and Typed or Printed Name of Signing Officer or Director Date

