

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25794

FILED  
Jan 04, 2008  
Secretary of State

**Entity Name:** PROVINCE OF THE MOST SACRED HEART OF JESUS, THIRD ORDER REGULAR OF ST. FRANCIS, INCORPORATED

**Current Principal Place of Business:**

PO BOX 137  
LORETTO, PA 15940 US

**New Principal Place of Business:**

131 SAINT FRANCIS DRIVE  
LORETTO, PA 15940 US

**Current Mailing Address:**

P.O BOX 188  
LORETTO, PA 15940 US

**New Mailing Address:**

**FEI Number:** 25-1064181      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SALEM, ALBERT M., JR., ESQ.  
4600 W KENNEDY BLVD  
TAMPA, FL 33609 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: P ( ) Delete  
Name: ORAVEC, CHRISTIAN  
Address: ST. FRANCIS FRIARY  
City-St-Zip: LORETTO, PA 15940

Title: V ( ) Delete  
Name: HENRY, TERENCE  
Address: HOLY SPIRIT FRIARY  
City-St-Zip: STEUBENVILLE, OH 43952

Title: S ( ) Delete  
Name: DAVIS, RICHARD  
Address: HOLY SPIRIT FRIARY  
City-St-Zip: STEUBENVILLE, OH 43952

Title: T ( ) Delete  
Name: MCBRIDE, MARK  
Address: MT ASSISI MONASTERY  
City-St-Zip: LORETTO, PA

Title: D ( ) Delete  
Name: LYONS, PETER  
Address: 2111 ASHLAND AVE  
City-St-Zip: BALTIMORE, MD 21205

Title: D ( ) Delete  
Name: ZEIS, GABRIEL  
Address: ST FRANCIS FRIARY  
City-St-Zip: LORETTO, PA 15940

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: POLICHNOWSKI, NICHOLAS  
Address: SAINT LOUIS FRIARY  
City-St-Zip: WASHINGTON, DC 20017

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: VANTASSELL, MALACHI  
Address: SAINT FRANCIS FRIARY  
City-St-Zip: LORETTO, PA 15940

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: MALACHI VANTASSELL

T

01/04/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date