

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29484

FILED  
Feb 11, 2012  
Secretary of State

**Entity Name:** THE SOCIETY OF ST. MARK, INC.

**Current Principal Place of Business:**

1301W. LONG LAKE ROAD  
SUITE 200  
TROY, MI 48098 US

**New Principal Place of Business:**

**Current Mailing Address:**

7103 AUSTINWOOD ROAD  
LOUISVILLE, KY 40214 US

**New Mailing Address:**

**FEI Number:** 38-2315098

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CD  
Name: FACIONE, BISHOP FRANCIS P  
Address: 7103 AUSTINWOOD ROAD  
City-St-Zip: LOUISVILLE, KY 40214 US

Title: PD  
Name: ASSEMANY, JOHN M  
Address: 7103 AUSTINWOOD ROAD  
City-St-Zip: LOUISVILLE, KY 40214 US

Title: D  
Name: DRAPER, AMANDA  
Address: 2620 MARTIN AVE  
City-St-Zip: LOUISVILLE, KY 40216 US

Title: D  
Name: DELACRUZ, DIANA L  
Address: 6824 CRESTON DR  
City-St-Zip: LOUISVILLE, KY 40258 US

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: BISHOP FRANCIS P. FACIONE

CD

02/11/2012

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

\_\_\_\_\_  
Date