2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006
Secretary of State

DOCUMENT# P32692

Entity Name: CATHOLIC LEGAL IMMIGRATION NETWORK, INC.

Current Principal Place of Business:

415 MICHIGAN AVENUE NE
SUITE 150
WASHINGTON, DC 20017

New Principal Place of Business:

Current Mailing Address:

415 MICHIGAN AVENUE NE
SUITE 150
WASHINGTON, DC 20017

New Mailing Address:

FEI Number: 52-1584951 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHELDON, JILL
501 N.E. FIRST AVENUE
#200
MIAMI, FL 33132 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:	BP.	( ) Delete
Name:	DIMARZIO, NICHOLAS REV.	
Address:	P.O. BOX C	
City-St-Zip:	BROOKLYN, NY 11202 US	
Title:	BP.	( ) Delete
Name:	TAMAYO, JAMES A REV.	
Address:	1901 CORPUS CHRISTI STREET	
City-St-Zip:	LAREDO, TX 78044	
Title:	SR.	( ) Delete
Name:	DUVALL, RAYMONDA SR.	
Address:	349 CEDAR STREET	
City-St-Zip:	SAN DIEGO, CA 92101 US	
Title:	MS.	( ) Delete
Name:	BELFORD, JANE G MS.	
Address:	PO BOX 29260	
City-St-Zip:	WASHINGTON, DC 200170260	
Title:	BP.	( ) Delete
Name:	FARRELL, KEVIN J REV.	
Address:	P.O. BOX29260	
City-St-Zip:	WASHINGTON, DC 20017 US	
Title:	BP.	( ) Delete
Name:	GERALD, KICANAS REV.	
Address:	111 SOUTH CHURCH AVENUE	
City-St-Zip:	TUCSON, AZ 85702 US	

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 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: DONALD M. KERWIN MR. 04/13/2006

Electronic Signature of Signing Officer or Director — Date