

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P36027

FILED
Apr 28, 2009
Secretary of State

Entity Name: THE MISSIONARY SOCIETY OF ST. PAUL THE APOSTLE IN THE STATE OF NEW YORK, INC.

Current Principal Place of Business:

1225 - 20TH AVENUE
VERO BEACH, FL 32960

New Principal Place of Business:

1225 - 20TH AVENUE
VERO BEACH, FL 32960 IR

Current Mailing Address:

1225 - 20TH AVENUE
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 13-1624092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNELLAN, THOMAS J
THE PAULIST FATHERS
1225 20TH AVE
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

MARTIN, CHARLES A
THE PAULIST FATHERS
1225 20TH AVE
VERO BEACH, FL 32960 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: CHARLES A. MARTIN

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: DUFFY, JOHN F
Address: 86-11 MIDLAND PARKWAY
City-St-Zip: JAMAICA, NY 11432

Title: VSD () Delete
Name: MORAN, JAMES W
Address: 86-11 MIDLAND PARKWAY
City-St-Zip: JAMACIA ESTATES, NY 11432

Title: D () Delete
Name: DESIANO, FRANCIS P
Address: 86-11 MIDLAND PARKWAY
City-St-Zip: JAMAICA ESTATES, NY 11432

Title: D () Delete
Name: BEHNKE, JOHN J
Address: 3015 FOURTH ST
City-St-Zip: WASHINGTON, DC 20017

Title: D () Delete
Name: HURLEYJ, JOHN E
Address: 18 BLEECKER ST
City-St-Zip: NEW YORK CITY, NY 10012

Title: T () Delete
Name: HALEY, JAMES A
Address: 415 W. 59TH ST
City-St-Zip: NEW YORK, NY 10019

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:

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: JOHN F. DUFFY

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date