2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2008
Secretary of State

DOCUMENT# P95000005832

Entity Name: ST. JOSEPH'S CATHOLIC RESOURCES CENTER, INC.

Current Principal Place of Business:

28925 U.S. HWY. 19 NORTH
CLEARWATER, FL 337612407 US

New Principal Place of Business:

Current Mailing Address:

28925 U.S. HWY. 19 NORTH
CLEARWATER, FL 337612407 US

New Mailing Address:

800 SOUTH DAKOTAH AVE
413
TAMPA, FL 33606 US

FEI Number: 59-3372564 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PAWLOSKI, DONALD
28925 U.S. HWY. 19 N.
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

PAWLOSKI, DONALD
800 SOUTH DAKOTAH AVE.
413
TAMPA, FL 33606 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: 08/11/2008
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PAWLOSKI, DONALD
Address: 28925 U.S. HWY. 19 N.
City-St-Zip: CLEARWATER, FL

Title: D ( ) Delete
Name: PIOTROWSKI, LEONARD
Address: 28925 U.S. HWY. 19 N.
City-St-Zip: CLEARWATER, FL

Title: D ( ) Delete
Name: PIOTROWSKI, LORETTA T
Address: 28925 U.S. HWY. 19 N.
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PAWLOSKI, DONALD
Address: 800 SOUTH DAKOTAH AVE, #413
City-St-Zip: TAMPA, FL 33606 US

Title: D (X) Change ( ) Addition
Name: PIOTROWSKI, LEONARD
Address: 800 SOUTH DAKOTAH AVE #413
City-St-Zip: TAMPA, FL 33606

Title: D (X) Change ( ) Addition
Name: PIOTROWSKI, LORETTA T
Address: 800 SOUTH DAKOTAH AVE #413
City-St-Zip: TAMPA, FL 33606

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON PAWLOSKI OWNE 08/11/2008
Electronic Signature of Signing Officer or Director — Date