

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006179

Entity Name: CATHOLIC CHARITIES OF CENTRAL FLORIDA HOUSING, INC.**Current Principal Place of Business:**1819 NORTH SEMORAN BLVD
ORLANDO, FL 32807**Current Mailing Address:**1819 NORTH SEMORAN BLVD
ORLANDO, FL 32807**FEI Number: 59-1214353****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**BURANOSKY, JOSEPH F
1819 N. SEMORAN BLVD.
ORLANDO, FL 32807 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: JOSEPH F. BURANOSKY****01/16/2013**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title C
Name GARDNER, CHRISTOPHER J
Address 1270 N. ORANGE AVE,
City-State-Zip: WINTER PARK FL 32789

Title ST
Name AGUILAR, JOSHUA MR
Address 903 LADY LAKE DRIVE
3407
City-State-Zip: MAITLAND FL 32751

Title D
Name MEANS, RANDY
Address 100 RIVERSIDE DRIVE
505
City-State-Zip: COCOA FL 32922

Title VC
Name STEVENS, BRIAN MR
Address 2733 FRENCH AVE
City-State-Zip: LAKE LAND FL 33801

Title D
Name MARCHESE, HENRY C
Address 3335 HILLMONT CIRCLE
City-State-Zip: ORLANDO FL 32817

Title D
Name WALLACE, MARY
Address 681 ALTAMIRA CIRCLE
102
City-State-Zip: CASSELBERRY FL 32701

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: CHRISTOPHER J. GARDNER**CHAIR****01/16/2013**

Electronic Signature of Signing Officer/Director Detail

Date