## 2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003773

Entity Name: CONGREGATION OF HOLY CROSS, UNITED STATES

PROVINCE, INC.

**Current Principal Place of Business:** 

54515 STATE ROAD 933 NORTH NOTRE DAME, IN 46556

**Current Mailing Address:** 

**PO BOX 774** 

NOTRE DAME, IN 46556

FEI Number: 32-0344245 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent

Date

FILED Jan 04, 2022

**Secretary of State** 

9564473387CC

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title VP, DIRECTOR

Name LIES, WILLIAM M CSC Name JARRET, PETER A CSC

Address PO BOX 1064 Address PO BOX 1064

City-State-Zip: NOTRE DAME IN 46556-1064 City-State-Zip: NOTRE DAME IN 46556-1064

Name

Title TREASURER, SECRETARY, Title DIRECTOR

**DIRECTOR** 

Name BEAUCHAMP, E WILLIAM CSC

Address PO BOX 774

City-State-Zip: NOTRE DAME IN 46556-0774

Title DIRECTOR

Name ISSING, DANIEL J. CSC

Address KING'S COLLEGE - HOLY CROSS

COMMUNITY

133 N. RIVER ST.

City-State-Zip: WILKES-BARRE PA 18711

Address UNIVERSITY OF NOTRE DAME - HOLY

CROSS COMMUNITY

124 CORBY HALL

HAAKE, GREGORY P CSC

City-State-Zip: NOTRE DAME IN 46556-5680

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: E. WILLIAM BEAUCHAMP, CSC

**SECRETARY** 

01/04/2022