

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29762

Entity Name: CATHOLIC RELIEF SERVICES - UNITED STATES
CONFERENCE OF CATHOLIC BISHOPS, INC.**FILED**
Feb 21, 2017
Secretary of State
CC6973802726**Current Principal Place of Business:**228 WEST LEXINGTON STREET
BALTIMORE, MD 21201**Current Mailing Address:**228 WEST LEXINGTON STREET
BALTIMORE, MD 21201**FEI Number: 13-5563422****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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**Officer/Director Detail :**

Title	CHAIRMAN
Name	MANSOUR, GREGORY J MST REV
Address	228 WEST LEXINGTON STREET
City-State-Zip:	BALTIMORE MD 21201

Title	PRESIDENT
Name	CALLAHAN, SEAN L
Address	228 WEST LEXINGTON STREET
City-State-Zip:	BALTIMORE MD 21201

Title	SECRETARY
Name	BRANSFIELD, J. BRIAN REVMSGR
Address	228 WEST LEXINGTON STREET
City-State-Zip:	BALTIMORE MD 21201

Title	TREASURER
Name	FARRELL, KEVIN
Address	228 WEST LEXINGTON STREET
City-State-Zip:	BALTIMORE MD 21201

Title	ASST. SECRETARY
Name	TWELE, ROBERT A.
Address	228 WEST LEXINGTON STREET OGC
City-State-Zip:	BALTIMORE MD 21201

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: ROBERT A. TWELE**ASST. CORP. SEC.****02/21/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date