## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 13, 2006 8:00 am Secretary of State 04-13-2006 90297 008 \*\*\*\*70.00

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1. Entity Name VILLA MARIA NURSING AND REHABILITATION CENTER, INC.									F0044	
Principal Place of Business 1050 NE 125 ST N. MIAMI, FL 33161 US			Mailing Address 1050 NE 125 ST NORTH MIAMI, FL 33161 US						50011	
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			į	04072006 Ch	g-NP	CR2E037 (11/05)	
City & State			City & State				4. FEI Number 59-1284678	3	<u> </u>	Applied For Not Applicable
Zip	Country		Zij	)	Country		5. Certificate of Sta	tus Desired	\$8.75 Ac Fee Requir	
6. Name and Address of Current Registered Agent					Name		7. Name and Addr	ess of New Re	gistered Agent	
FITZGERALD, PATRICK J 110 MERRICK WAY SUITE 3-B CORAL GABLES, FL 33134						Street Address (P.O. Box Number is Not Accepta				
CORAL G	ABLES, FL	33134								
					City				FL Zip Co	de
	tions of registe	submits this statement for red agent, printed name of registered agent.			registered office of the control of			he State of Flori	DATE	
<u> : </u>		, printed table of registration	1	, more			,		DATE	
Filing Fee is \$61.25 Due by May 1, 2006				9. Election Carnpaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees		ke check payable la Department of S	
10.	1	OFFICERS AND DIF	RECTORS		11.	, ,	ADDITIONS/CHANGE	S TO OFFICER		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	EY, WILLIAM J. BISCAYNE BLVD DRES, FL		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	291 NW 43	JOSEPH M AVE CREEK, FL 33066		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	RALPH E. ROAD, STE. 600 ABLES, FL 33143		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	110	HTRICK FITZ HERRICK WA LL GABLES,	Y DUITE	3B	X Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			:	☐ Change	Addilion
indicated of the cor	l on this report	information supplied with or supplemental report is or receiver or trustee emports with an artifices.	true and owered to	accurate and that nexecute this report	ny signature shall t	have the :	same legal effect as if	made under oa	ith; that I am an offici	er or director

JOSEPH M. CATANIA

Date

954-484-1515

ATTACHMENT -19
#- 7/039J
on Profit Corporation Annual Report (UBR)

FY 2006 Non-Profit Corporation Annual Report (UBR)
Attachment – Additional Directors

AS/D

Rev. Msgr. John J. Vaughan c/o 9401 Biscayne Boulevard Miami Shores, FL 33138

D

Mr. Rudy J. Noriega 3529 Gulfstream Way Davie, FL 33328

D

Ms. Josie Romano Brown c/o 3663 South Miami Avenue Miami, FL 33133

D

Mr. Thomas O'Brien 200 Ocean Lane Drive, #409 Key Biscayne, FL 33149

D

Ms. Patricia Palamara 4200 Mangrum Court Hollywood, FL 33021

D

Rev. Msgr. Franklyn M. Casale c/o 16400 N.W. 32 Avenue Miami, FL 33054

D

Mr. John Johnson c/o 4725 North Federal Hwy Fort Lauderdale, FL 33307

D

Dr. Richard Turcotte c/o 9401 Biscayne Boulevard Miami Shores, FL 33138 D

Rev. Msgr. Tomas Marin c/o 3900 N.W. 79 Avenue, Suite 731 Miami,FL 33166

D

Mr. Bud Farrey c/o 1850 NE 146<sup>th</sup> Street North Miami, FL 33181

D

Len T. Sperry, MD, PhD 19397 Black Olive Lane Boca Raton, FL 33498

D

Asif D. Jamal 1028 Cotorro Avenuee Coral Gables, FL 33146

D

John E. Matuska c/o 3663 South Miami Avenue Miami, FL 33133

D

Ana Mederos c/o 651 East 25<sup>th</sup> Street Hialeah, FL 33013

D

Mark J. Panciera c/o 4200 Hollywood Blvd. Hollywood, FL 33021

D

Kenneth C. Fischer, MD 1190 N.W.95 Street, #402 Miami, FL 33150