

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 14, 2003 8:00 am**  
**Secretary of State**

04-14-2003 90416 015 \*\*\*\*70.00

**DOCUMENT # 711856**

1. Entity Name

**CATHOLIC HOUSING FOR THE ELDERLY & HANDICAPPED,  
INC.**



Principal Place of Business

**11440 N. KENDALL DR  
STE E-209  
MIAMI FL 33176  
US**

Mailing Address

**11440 N. KENDALL DR  
STE E-209  
MIAMI FL 33176  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1097836**

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**FITZGERALD, J. PATRICK  
110 MERRICK WAY  
SUITE 2-C  
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CD PENNEKAMP, TOM 1436 S MIAMI AVE MIAMI FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VCSD HENNESSEY, WILLIAM 9401 BISCAYNE BLVD MIAMI SHORES FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P CATANIA, JOSEPH M 291 N.W. 43 AVE. COCONUT CREEK FL 33066</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D LAWSON, RALPH E C/O 6855 RED ROAD, STE. 600 CORAL GABLES FL 33143</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

**REQUIRED**

**JOSEPH M. CATANIA**

**3-10-03 954-484-1515**

CR2E037 (10/02)

Attachment

90085836

711856

**FY 2003 Uniform Business Report (UBR)**  
**Attachment – Additional Directors**

D

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

D

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

D

Mr. Rudy J. Noriega  
781 Crandon Blvd, Apt 405  
Key Biscayne, FL 33149

D

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

D

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

D

Rev. Msgr. Tomas Marin  
c/o 9401 Biscayne Boulevard  
Miami Shores, FL 33138

D

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

D

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

D

Ms. Patricia Palamara  
4200 Mangrum Court  
Hollywood, FL 33021

D

Michael T. Reilly, MD  
c/o 4875 N Federal Hwy, #800  
Fort Lauderdale, FL 33308

D

Mrs. Lourdes Sanchez  
9540 Journey's End Road  
Coral Gables, FL 33156

D

Len T. Sperry, MD, PhD  
c/o 11300 NE Second Avenue  
Miami Shores, FL 33161

D

Most Rev. Thomas Wenski  
c/o 9401 Biscayne Boulevard  
Miami Shores, FL 33138

D

Asif D. Jamal  
5301 Riviera Drive  
Coral Gables, FL 33146

D

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

D

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