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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 734646

LEGION OF MARY OF MIAMI, INC.



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129 AMERICA AVENUE CORAL GABLES FL 33134			P.O. BOX 381752 MIAMI FL 33238								
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2 Deinstead D	Place of Business	22	Mailing Address				3. Date Inco	rporated or Qual	ifed		
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City & Stat	te		City & State				5. Certifcate	of Status Desire	ed 🗆	•	Additional
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24	9. Name and Address of	29	torod Agont	30				d Contribution d Address of No	ew Registered		10 1 662
	5. Name and Address (or Current Regis	tereu Agent		81	Name			- · · · · · · · · · · · · · · · · · · ·		
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STEELE, MARGARET D. 19281 HOLIDAY RD						Street Address (P.O. Box Number is Not Acceptable)					
MIAMI FL	· 				83						
MIAMI FL	33137					Oit.			··	85 Zip	Code
}					1 1	City			FL	.	
11. Pursuant	to the provisions of Sections registered agent, or both, in	617.0502 and 6	17.1508, Florida Stat	utes, the a	bove	-named corpo	ration submits t	his statement for	the purpose of	changing its	registered gistered
office or a	registered agent, or both, in t am familiar with, and accept t	the State of Florid the obligations of	sa. Such change was Section 617.0503, F	lorida Stati	utes.	ile corporation. صد	is board of dire	•		nanon do re	1/4/
SIGNATURE	Margares	6 Printe	MA	RGAR	2.1	T 51	EELE	PRESIL	DANT	_ -1	4-47
	Signature, typed or printed name of re	g stored agent and title	if applicable (NO	TF: Registered			when reinstation)		DATE		
42		CEDS AND DIDE			Agent	signature required	ADDITION	S/CHANGES TO	OFFICERS AN	ID DIRECTO	RS IN 12
12.	OFFIC	CERS AND DIRE	CTORS	13.		signature reduced	ADDITION	S/CHANGES TO	OFFICERS AN	D DIRECTO	RS IN 12
TITLE	PD	CERS AND DIRE		13.	TLE .	signature requiseo	ADDITION	S/CHANGES TO	OFFICERS AN		
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.