

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003718

FILED
Jun 03, 2009
Secretary of State

Entity Name: MARIAN CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

12100 WEST DIXIE HIGHWAY
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

12100 WEST DIXIE HIGHWAY
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: 65-1051283 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MCDEARMAID, MICHAEL
12100 WEST DIXIE HIGHWAY
1806
NORTH MIAMI, FL 33161 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MCDEARMAID, MICHAEL
Address: 840 N.E. 127TH STREET
City-St-Zip: N MIAMI BEACH, FL 33161

Title: D () Delete
Name: MCNICHOLAS, VINCE
Address: 16440 84 COURT NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

Title: DS () Delete
Name: MARINELLO, LEONARD
Address: 5000 EAST 10TH COURT
City-St-Zip: HIALEAH, FL 33013

Title: D () Delete
Name: ROMANIK, TOM
Address: 195 NW 103 STREET
City-St-Zip: MIAMI SHORES, FL 33150

Title: D () Delete
Name: MCENROE, JOHN
Address: 13510 SW 6 PLACE
City-St-Zip: DAVIE, FL 33325

Title: D () Delete
Name: SANFILIPPO, SAM
Address: 1015 N.E. 127TH STREET #21
City-St-Zip: NORTH MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL MCDEARMAID

PRES

06/03/2009

Electronic Signature of Signing Officer or Director

Date