


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

FILED
Mar 20, 2003 8:00 am
Secretary of State

03-20-2003 90122 003 ****70.00

DOCUMENT # N13289

1. Entity Name
CATHOLIC HEALTH SERVICES, INC.



Principal Place of Business
**4740 N. STATE RD. 7
4790 N STATE RD 7
LAUDERDALE LAKES FL 33319
US**

Mailing Address
**4740 N. STATE RD. 7
4790 N STATE RD 7
LAUDERDALE LAKES FL 33319
US**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

4. FEI Number **59-2645139** Applied For Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**FITZGERALD, J. PATRICK
110 MERRICK WAY, SUITE 3-B
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	CD PENNEKAMP, TOM 1436 SOUTH MIAMI AVE MIAMI FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCSD HENNESSEY, WILLIAM C/O 9401 BISCAYNE BLVD MIAMI SHORES FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CATANIA, JOSEPH M 291 N.W. 43 AVE. COCONUT CREEK FL 33066	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAWSON, RALPH E C/O 6855 RED ROAD, STE. 600 CORAL GABLES FL 33143	<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 JOSEPH M. CATANIA** 3-10-03 954-484-1515

CR2E037 (10/02)

Attachment

3004490
N13289

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 146th 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