## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 711856** 

Entity Name: CATHOLIC HOUSING FOR THE ELDERLY & HANDICAPPED,

Apr 02, 2019 **Secretary of State** 9938992666CC

**FILED** 

INC.

**Current Principal Place of Business:** 

11410 N. KENDALL DR STE 306 MIAMI, FL 33176

## **Current Mailing Address:**

11410 N. KENDALL DR STE 306 MIAMI, FL 33176 US

FEI Number: 59-1097836 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

FITZGERALD, J. PATRICK 110 MERRICK WAY SUITE 3B CORAL GABLES, FL 33134 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **VCSD** Title

WORLEY, ELIZABETH A Name Name CATANIA, JOSEPH M Address C/O 9401 BISCAYNE BLVD Address 291 N.W. 43 AVE.

COCONUT CREEK FL 33066 City-State-Zip: MIAMI SHORES FL 33138 City-State-Zip:

Title **DIRECTOR** Title CD

LAWSON, RALPH E Name PANCIERA, MARK J Name

Address 6001 NORTH OCEAN DRIVE, #1202 Address 6041 NW 74 TERRACE

City-State-Zip: HOLLYWOOD FL 33019 City-State-Zip: PARKLAND FL 33067

I hereby 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 all other like empowered.

Electronic Signature of Signing Officer/Director Detail