

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 720711

**Entity Name:** SISTERS OF MERCY, CLOGHER, N. IRELAND AND FLORIDA, INC.

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC9685268066**

**Current Principal Place of Business:**

4224 W. STONECREEK CIRCLE  
HOLLYWOOD, FL 33024

**Current Mailing Address:**

4224 W. STONECREEK CIRCLE  
HOLLYWOOD, FL 33024 US

**FEI Number: 09-0073451**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WICH, JAMES J.  
SUITE 620 - CALIFORNIA FEDERAL TOWER  
2400 E COMMERCIAL BLVD  
FT LAUDERDALE, FL 33308 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

**Officer/Director Detail :**

Title ST  
Name MAGUIRE, ANASTASIA M. SR.  
Address 4224 W. STONECREEK CIRCLE  
City-State-Zip: HOLLYWOOD FL 33024

Title VD  
Name MCMANUS, PATRICIA J. SR.  
Address 4224 W. STONECREEK CIRCLE  
City-State-Zip: HOLLYWOOD FL 33024

Title PD  
Name CORRIGAN, ANNE T. SR.  
Address 4224 W. STONECREEK CIRCLE  
City-State-Zip: HOLLYWOOD FL 33024

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.

**SIGNATURE: SISTER ANASTASIA MAGUIRE**

**DIRECTOR**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date