

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

DOCUMENT# 759141

**Entity Name:** CATHOLIC CHARISMATIC SERVICES OF THE ARCHDIOCESE  
OF MIAMI, INC.

**FILED**  
**Jan 07, 2015**  
**Secretary of State**  
**CC6127744413**

**Current Principal Place of Business:**

3600 SW 32 BLVD  
HOLLYWOOD, FL 33023

**Current Mailing Address:**

P.O. BOX 816128  
HOLLYWOOD, FL 33081-0128 US

**FEI Number: 59-2058282**

**Certificate of Status Desired: No**

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

FITZGERALD, J. PATRICK  
110 MERRICK WAY  
STE. 3-B  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name HORVATH, EMERY  
Address 2231 HAVANA DR  
City-State-Zip: MIRAMAR FL 33023

Title SD  
Name HORVATH, MARY  
Address 2231 HAVANA DR  
City-State-Zip: MIRAMAR FL 33023

Title TD  
Name FINK, REV JOHN F  
Address 2441 SW 82ND AVE UNIT 204-1  
City-State-Zip: DAVIE FL 33324

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: EMERY HORVATH**

**PRESIDENT**

**01/07/2015**

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

\_\_\_\_\_  
Date