

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000011400

**Entity Name:** ST. JOSEPH HAITIAN MISSION MANOR, INC.

**Current Principal Place of Business:**

11410 N KENDALL DRIVE STE 201  
MIAMI, FL 33176

**Current Mailing Address:**

11410 N KENDALL DRIVE STE 201  
MIAMI, FL 33176

**FEI Number: 45-4016705**

**Certificate of Status Desired: No**

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

FITZGERALD, J. PATRICK ESQ  
J. PATRICK FITZGERALD & ASSOCIATES, P.A.  
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 MARIN, TOMAS M  
Address 5400 SW 102ND AVE  
City-State-Zip: MIAMI FL 33056

Title VPD  
Name WORLEY, ELIZABETH  
Address 9401 BISCAYNE BLVD  
City-State-Zip: MIAMI SHORES FL 33138

Title STD  
Name CATANIA, JOSEPH M  
Address 11410 N KENDALL DRIVE STE 201  
City-State-Zip: MIAMI FL 33176

Title D  
Name CASCIATO, MICHAEL  
Address 9401 BISCAYNE BLVD  
City-State-Zip: MIAMI SHORE FL 33138

Title D  
Name JEANTY, CHANEL  
Address 9401 BISCAYNE BLVD  
City-State-Zip: MIAMI SHORE FL 33138

Title D  
Name O'HALA, STEVEN  
Address 3331 NE 10TH TERRACE  
City-State-Zip: POMPANO BEACH FL 33064

*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: TOMAS M. MARIN**

**PD**

**02/22/2013**

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

\_\_\_\_\_  
Date