2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000211

Entity Name: CATHOLIC CHARITIES LEGAL SERVICES, ARCHDIOCESE OF

MIAMI, INC.

FILED
Apr 09, 2018
Secretary of State
CC6159157088

Current Principal Place of Business:

28 WEST FLAGLER STREET SUITE 1000 MIAMI, FL 33130

Current Mailing Address:

28 WEST FLAGLER STREET SUITE 1000 MIAMI, FL 33130 US

FEI Number: 65-0804650 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FITZGERALD, J PESQ 110 MERRICK WAY SUITE 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:

Address

Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title SOLE MEMBER OF CORPORATION Title CEO

Name WENSKI, MOST REV. THOMAS G. Name MCGRORTY, RANDOLPH P. ESQ.

ARCHBISHOP Address

9401 BISCAYNE BOULEVARD SUITE 1000

City-State-Zip: MIAMI SHORES FL 33138 City-State-Zip: MIAMI FL 33130

Title DIRECTOR Title DIRECTOR

Name KRAMER, MARY E. ESQ. Name MURPHY, TIMOTHY ESQ.

Address 168 SE 1ST SREET Address 201 S. BISCAYNE BOULEVARD

SUITE 802 SUITE 1600

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title PRESIDENT Title SECRETARY

Name DOLLAR, JORDAN E. ESQ. Name RUSSELL, ANTONETTE P. ESQ.

Address 8603 S. DIXIE HIGHWAY Address 6750 N. ANDREWS AVENUE

UNIT 211 SUITE 200

City-State-Zip: MIAMI FL 33143 City-State-Zip: FORT LAUDERDALE FL 33309

Title VP Title COO

Name CHUNG, SUI ESQ. Name MEZADIEU, MYRIAM DOJ-AR

Address 3250 GRAND AVENUE Address 28 WEST FLAGLER STREET

MEZZANINE 1 SUITE 201 SUITE 1000

City-State-Zip: MIAMI FL 33133 City-State-Zip: MIAMI FL 33130

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28 WEST FLAGLER STREET

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: MYRIAM MEZADIEU COO 04/09/2018

Officer/Director Detail Continued:

Title DIRECTOR

Name CACOPARDO, ILARIA ESQ.

Address 999 BRICKELL AVENUE

PH 1102

City-State-Zip: MIAMI FL 33131

Title TREASURER

Name PESCH, CHRISTOPHER ESQ.

Address 28 WEST FLAGLER STREET

SUITE 1000

City-State-Zip: MIAMI FL 33130

Title DIRECTOR

Name FONTE, KARI ANN ESQ.

Address 901 PONCE DE LEON BLVD.

SUITE 601

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR

Name FLORES, RAUL ESQ.

Address 2103 CORAL WAY

SUITE 800

City-State-Zip: MIAMI FL 33145

Title DIRECTOR

Name SANCHEZ-ROIG, REBECA ESQ.

Address 168 SE 1ST STREET

SUITE 800

City-State-Zip: MIAMI FL 33131