

**2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N98000000211

**Entity Name:** CATHOLIC CHARITIES LEGAL SERVICES, ARCHDIOCESE OF  
MIAMI, INC.

**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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SOLE MEMBER OF CORPORATION  
Name WENSKI, MOST REV. THOMAS G.  
ARCHBISHOP  
Address 9401 BISCAYNE BOULEVARD  
City-State-Zip: MIAMI SHORES FL 33138

Title CEO  
Name MCGRORTY, RANDOLPH P. ESQ.  
Address 28 WEST FLAGLER STREET  
SUITE 1000  
City-State-Zip: MIAMI FL 33130

Title DIRECTOR  
Name KRAMER, MARY E. ESQ.  
Address 168 SE 1ST SREET  
SUITE 802  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR  
Name MURPHY, TIMOTHY ESQ.  
Address 201 S. BISCAYNE BOULEVARD  
SUITE 1600  
City-State-Zip: MIAMI FL 33131

Title PRESIDENT  
Name DOLLAR, JORDAN E. ESQ.  
Address 8603 S. DIXIE HIGHWAY  
UNIT 211  
City-State-Zip: MIAMI FL 33143

Title DIRECTOR  
Name RUSSELL, ANTONETTE P. ESQ.  
Address 6750 N. ANDREWS AVENUE  
SUITE 200  
City-State-Zip: FORT LAUDERDALE FL 33309

Title VP  
Name CHUNG, SUI ESQ.  
Address 3250 GRAND AVENUE  
MEZZANINE 1 SUITE 201  
City-State-Zip: MIAMI FL 33133

Title COO  
Name MEZADIEU, MYRIAM DOJ-AR  
Address 28 WEST FLAGLER STREET  
SUITE 1000  
City-State-Zip: MIAMI FL 33130

**Continues on page 2**

*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**

**06/22/2018**



**Officer/Director Detail Continued :**

Title SECRETARY  
Name CACOPARDO, ILARIA ESQ.  
Address 999 BRICKELL AVENUE  
PH 1102  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR  
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 TREASURER  
Name SANCHEZ-ROIG, REBECA ESQ.  
Address 168 SE 1ST STREET  
SUITE 800  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR  
Name CANERO DAVIES, ANTONIA ESQ.  
Address 1101 BRICKELL AVENUE  
SOUTH TOWER, SUITE 700  
City-State-Zip: MIAMI FL 33131