

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708247

FILED  
Jan 28, 2010  
Secretary of State

**Entity Name:** THE CLOISTERS FOUNDATION OF ST. BERNARD DE CLAIRVAUX

**Current Principal Place of Business:**

16711 WEST DIXIE HIGHWAY  
NORTH MIAMI BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

16711 WEST DIXIE HIGHWAY  
NORTH MIAMI BEACH, FL 33160

**New Mailing Address:**

**FEI Number:** 59-6165566      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

FOX, RONALD N  
2025 NE 164 STREET  
APT. 1004  
NORTH MIAMI BEACH, FL 33162 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** FOX, RONALD N REV.DR.  
**Address:** 2025 NE 164 STREET, APT. 1004  
**City-St-Zip:** NORTH MIAMI BEACH, FL 33162

**Title:** VP  
**Name:** BURGESS, ROBERT  
**Address:** 468 NE 100 STREET  
**City-St-Zip:** MIAMI SHORES, FL 33138

**Title:** D  
**Name:** HAMILTON, ELAINE  
**Address:** 840 GAZETTA WAY  
**City-St-Zip:** WEST PALM BEACH, FL 33413

**Title:** T  
**Name:** WALKER, KIM  
**Address:** 707 NE 112 STREET  
**City-St-Zip:** BISCAYNE PARK, FL 33161

**Title:** S  
**Name:** LAROCHE, DONNETTE  
**Address:** 1326 ALEXANDER BEND  
**City-St-Zip:** WESTON, FL 33327

**Title:** D  
**Name:** BRADSHAW, RUBYANN  
**Address:** 432 NW 111 TERRACE  
**City-St-Zip:** MIAMI SHORES, FL 33168

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: RONADL N . FOX

P

01/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date