

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 720711

1. Entity Name

SISTERS OF MERCY, CLOGHER, N. IRELAND AND FLORID

Principal Place of Business

1172 SW 26TH AVENUE
DEERFIELD BCH FL 33442

Mailing Address

1172 SW 26TH AVENUE
DEERFIELD BCH FL 33442

2. Principal Place of Business

5392 S.W. 33rd AVE

Suite, Apt. #, etc.

3. Mailing Address

5392 S.W. 33rd AVE

Suite, Apt. #, etc.

City & State

FT. LAUDERDALE, FL

Zip

33312

Country

U.S.A.

City & State

FT. LAUDERDALE, FL

Zip

33312

Country

U.S.A.

4. FEI Number

09-0073451

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WICH, JAMES J.
SUITE 620 - CALIFORNIA FEDERAL TOWER
2400 E COMMERCIAL BLVD
FT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	ST	☐ Delete
NAME	O'ROURKE, COLETTE (SIS)	
STREET ADDRESS	1172 S.W. 26TH AVE.	
CITY-ST-ZIP	DEERFIELD BCH FL	
TITLE	VD	☐ Delete
NAME	MAGUIRE, ANASTASIA (SIS)	
STREET ADDRESS	1172 S.W. 26TH AVE.	
CITY-ST-ZIP	DEERFIELD BCH FL	
TITLE	PD	☐ Delete
NAME	MCMANUS, PATRICIA	
STREET ADDRESS	4525 W. 2ND AVENUE	
CITY-ST-ZIP	HIALEAH FL	
TITLE	SD	☐ Delete
NAME	SHERRY, JOSEPHINE (SIS)	
STREET ADDRESS	3751 S W 39TH ST	
CITY-ST-ZIP	W HOLLYWOOD FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	ST	☒ Change ☐ Addition
NAME	O'ROURKE, COLETTE (SIS)	
STREET ADDRESS	5392 S.W. 33rd AVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33312	
TITLE	VD	☒ Change ☐ Addition
NAME	MAGUIRE, ANASTASIA (SIS)	
STREET ADDRESS	5392 S.W. 33rd AVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33312	
TITLE	PD	☒ Change ☐ Addition
NAME	MCMANUS, PATRICIA	
STREET ADDRESS	5392 S.W. 33rd AVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33312	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sister Colette O'Rourke (Sister Colette O'Rourke) 1/12/01 954-561-4641

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)



DO NOT WRITE IN THIS SPACE