
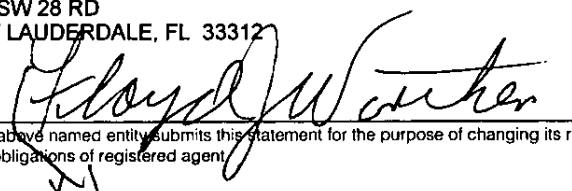

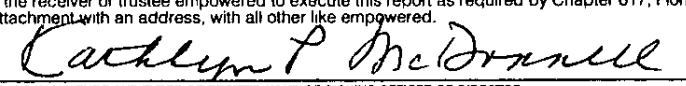


**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT.**

**FILED**  
**Apr 19, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 730834</b>		
1. Entity Name <b>ST. VINCENT DEPAUL SOCIETY OF OUR LADY QUEEN OF MARTYRS, INC.</b>		
Principal Place of Business <b>2731 SW 11TH COURT FORT LAUDERDALE, FL 33312</b>	Mailing Address <b>2731 SW 11TH COURT FORT LAUDERDALE, FL 33312</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>WORTHEN, FLOYD 1305 SW 28 RD FORT LAUDERDALE, FL 33312</b> 		<b>DO NOT WRITE IN THIS SPACE</b>
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  (NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
<b>10. OFFICERS AND DIRECTORS</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SYLVIA, ROEPKE 2425 WHALE HARBOR LANE FORT LAUDERDALE, FL 33312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCDONNELL, KATHLYN, P 6903 CYPRESS RD PH19 PLANTATION, FL 33317	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VD STEVE, ROEPKE 2425 WHALE HARBOR LANE FORT LAUDERDALE, FL 33312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ABBOTT, EDWARD 2841 SW 8TH ST FORT LAUDERDALE, FL 33312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 		Date: <b>4/3/07</b> Daytime Phone #: <b>954 581-6576</b>



01292007 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-0816456</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

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05/01/07-80011-004 61.25