2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 730834

1. Entity Name

ST. VINCENT DEPAUL SOCIETY OF OUR LADY QUEEN OF

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FILED

Secretary of State

02-07-2003 90063 028 ****61.25

Feb 07, 2003 8:00 am

Principal Place of Business Mailing Address 2731 SW 11TH COURT 22002103 2731 SW 11TH COURT FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-0816456 Applied Fór Not Applicable Zip Country \$8.75. Additional 5. Certificate of Status Desired -Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WORTHEN, FLOYD Street Address (P.O. Box Number is Not Acceptable) 1305 SW 28 RD FORT LAUDERDALE FL 33312 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. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE ☐ Change ■ Addition SYLVIA, ROEPKE NAME NAME STREET ADDRESS 2425 WHALE HARBOR LANE STREET ADDRESS FORT LAUDERDALE FL 33312 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition MCDONNELL, KATHLYN, P NAME NAME 6903 CYPRESS RD PH19 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF PLANTATION FL 33317 CÎTY-ST-ZIP PD TITLE ☐ Delete ☐ Change ☐ Addition **ED. HANLON** NAME NAME 2040 SW 30 TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33312 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition STEVE, ROEPKE

12. I hereby certify that the information supplied with this filling 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.

NAME

TITLE

NAME

TITLE

NAME

☐ Delete

☐ Delete

STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE

NAME

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

2425 WHALE HARBOR LANE

FORT LAUDERDALE FL 33312

FORT LAUDERDALE FL 33312

FLOYD, WORTHEW

1305 SW 28 RD

2-1-03

WORTHEN

☐ Change

☐ Change

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☐ Addition