

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **731937** (9)

1. Corporation Name

**ST. VINCENT CATHOLIC MEN'S CLUB, INCORPORATED, O
F MARGATE, FLORIDA**



Principal Place of Business

Mailing Address

**6199 NW 10TH STREET
MARGATE FL 33063**

**1058 W. RIVER DRIVE
MARGATE FL 33063**

3. Date Incorporated or Qualified
02/20/1975

3a. Date of Last Report
11/21/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 **1419 NW 80th Ave - #D**

23 City & State

27 Suite, Apt. #, etc.
#D
28 **MARGATE, FL**

24 Zip

Country

29 Zip

Country

25

30 **33063**

BROWARD

4. FEI Number

APPLIED FOR 65-0623056

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCDERMOTT, PAUL J
1058 WEST RIVER DRIVE
MARGATE FL 33063**

81 Name

GERALD J. GERRITY

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

1419 NW 80th Ave - #D

83

84 City

MARGATE

FL

85 Zip Code

33063

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Gerald J. Gerrity (GERALD J. GERRITY) PRESIDENT

6/13/96

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

GERRITY, J. GERRITY

STREET ADDRESS

1419 NW 80th Ave., STE. 7-D

CITY - ST - ZIP

MARGATE FL 33063

TITLE

VPD

NAME

SCHWEITZER, FRED

STREET ADDRESS

1700NW 65TH AVE.

CITY - ST - ZIP

MARGATE FL 33063

TITLE

TD

NAME

MCDERMOTT, PAUL J

STREET ADDRESS

1058 WEST RIVER DRIVE

CITY - ST - ZIP

MARGATE FL 33063

TITLE

SD

NAME

AMENDOLA, THOMAS

STREET ADDRESS

6570 ROYAL PALM BLVD.

CITY - ST - ZIP

MARGATE FL 33063

TITLE

D

NAME

MENDITTO, ANDREW

STREET ADDRESS

1501 CATHEDRAL DRIVE

CITY - ST - ZIP

MARGATE FL 33063

TITLE

D

NAME

MCCARRY, JOHN L F

STREET ADDRESS

6611 NW 29TH PLACE

CITY - ST - ZIP

MARGATE FL 33063

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

**PD
GERRITY, GERALD J
1419 NW 80th Ave - #D
MARGATE, FL 33063**

**TD
MCCARRY, JOHN F
6611 NW 29th PLACE
MARGATE, FL 33063**

**D
JAMES TRACY
6955 NW 16th STREET
MARGATE, FL 33063**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Gerald J. Gerrity

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/13/96 (954) 786-8700

Date

Daytime Phone #

CR2E037 (3/96)