

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731937

FILED
Jan 24, 2007
Secretary of State

Entity Name: ST. VINCENT CATHOLIC MEN'S CLUB, INCORPORATED, OF MARGATE, FLORIDA

Current Principal Place of Business:

6009 NW 10TH ST.
MARGATE, FL 33063

New Principal Place of Business:

6009 NW 10TH ST.
MARGATE, FL 33063 US

Current Mailing Address:

1700 NW 65TH AVE
MARGATE, FL 33063 US

New Mailing Address:

FEI Number: 65-0623056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWEITZER, FRED
1700 NW 65TH AVE
MARGATE, FL 33063 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 () Delete
Name: COLON, RALPH
Address: 6751 NORTHWEST 22ND STREET
City-St-Zip: MARGATE, FL 33063

Title: V () Delete
Name: PIZZA, JERRY
Address: 6670 ROYAL PALM BOULEVARD
City-St-Zip: MARGATE, FL 33063

Title: SD () Delete
Name: POPOVICH, RICH
Address: 6066 WINFIELD BLVD
City-St-Zip: MARGATE, FL 33063

Title: T () Delete
Name: HUDAK, GEORGE
Address: 6750 NORTHWEST 16 STREET
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: TINELLA, JOSEPH
Address: 1620 NW 66 TERR
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: MICHAEL, PAPA
Address: 6795 NW 14TH PL
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: GEORGE HUDAK

TREA

01/24/2007

Electronic Signature of Signing Officer or Director

Date