

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 732203 (5)

1. Corporation Name

DISTRICT COUNCIL OF HOLLYWOOD, SOCIETY OF ST. VINCENT DE PAUL, INC.

Principal Place of Business

1090 S. 56TH AVENUE
HOLLYWOOD FL 33023

Mailing Address

1090 S. 56TH AVENUE
HOLLYWOOD FL 33023



3. Date Incorporated or Qualified

03/18/1975

3a. Date of Last Report

02/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1580461

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

DODDO, BERNARD
9050 PINES BLVD
#383
PEMBROKE PINES FL 33024

81 Name

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

83

84 City

FL

85 Zip Code

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

SIGNATURE

Signature, typed or printed name of registered agent and 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 GIARDINO, LEANORA
STREET ADDRESS 1710 N.W. 88TH WAY
CITY-ST-ZIP PEMBROKE PINES FL

☐ DELETE

TITLE VD
NAME BARDSLEY, JAMES
STREET ADDRESS 6840 SW 12 STR
CITY-ST-ZIP PEMBROKE PINES FL

☐ DELETE

TITLE VDG
NAME RIGGIO, ANNA
STREET ADDRESS 4830 SW 193RD LANE
CITY-ST-ZIP FT. LAUDERDALE FL

☒ DELETE

TITLE TD
NAME DODDO, BERNARD
STREET ADDRESS 9050 PINES BLVD #383
CITY-ST-ZIP PEMBROKE PINES FL

☐ DELETE

TITLE SD
NAME MARKLE, FLORENCE
STREET ADDRESS 11886 N.W. 11 ST.
CITY-ST-ZIP PEMBROKE PINES FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition

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☐ Change ☐ Addition

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:

J. E. J. Bardsley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-96 (954) 983-3378
Date Daytime Phone #

CR2E037 (12/95)