

FILE NOW: FILING FEE IS \$61.25

FILED

Jun 25 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **732203** (5)  
1. Corporation Name  
**DISTRICT COUNCIL OF HOLLYWOOD, SOCIETY OF ST. VINCENT DE PAUL, INC.**



Principal Place of Business <b>1090 S. 56TH AVENUE HOLLYWOOD FL 33023</b>	Mailing Address <b>1090 S. 56TH AVENUE HOLLYWOOD FL 33023</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified <b>03/18/1975</b>
4. FEI Number <b>59-1580461</b>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent <b>HAENEL, ROY 9449 SW 52 ST #383 COOPER CITY FL 33328</b>
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10. Name and Address of New Registered Agent 81 Name <b>Josephine Lombardo</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>20825 N.W. 9th Ct.</b> 83 <b>North Miami, FL 33169</b> 84 City <b>FL</b> 85 Zip Code
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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 JOSEPHINE LOMBARDO X Josephine Lombardo 5/1/98  
Signature typed or printed name of registered agent and title if applicable (NOT Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GIARDINO, LEANORA 1710 N.W. 88TH WAY PEMBROKE PINES FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BARDLEY, JAMES 6840 SW 12 STR PEMBROKE PINES FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDG LAVERY, THOMAS V. 800 THREE ISLANDS BLVD APT 220 HALLANDALE FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HAENEL, ROY 9449 SW 52 ST COOPER CITY FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MARKLE, FLORENCE 11886 N.W. 11 ST. PEMBROKE PINES FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D President Josephine Lombardo 20825 N.W. 9th Ct. North Miami, FL 33169
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	D V. Pres. Joan Saelens 1132 Adams St. Hollywood, FL 33021
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	TD Treasurer Joan Gardner 2791 Oakview Way Davie FL 33328
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	TD Assist. Tres. Gerard E. Marcoux 3321 S.W. 38th St. Hollywood, FL 33023
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	SD Secretary Nickle Williams 464 N.E. 210 Terr. No. Miami Beach, 33179
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> DELETE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Josephine Lombardo 5/1/98

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