## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1997

FILED
Jan 30 1997 8:00am
Secretary of State

SOCIE	MENT # 73244 TY OF SAINT VINCENT DE POMPANO BEACH, INC.	` '	<b>N</b> CI			
Principal Plac	e of Business	Mailing Address		1.00		
2323 N. DIXIE HWY. 2323 N. DIXIE HWY. POMPANO BEACH FL 33060 POMPANO BEACH FL		2323 N. DIXIE HWY. POMPANO BEACH FL 3300	3060-4960			
					3. Date Incorporated or Qualified 3 04/09/1975	la. Date of Last Report 01/25/1996
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-1580460	Not Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
City & Stat		City & State				Fee Required
3		28			<b>6.</b> Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for intain	
4	25	29	30		Florida Statutes Y	· •
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Regist	tered Agent
			81 1	lame		
	MOTT, MARLENE		82 8	treet Add	ress (P.O. Box Number is Not Acceptable)	
	ORTH DIXIE HWY				<u> </u>	
POMPAI	NO BEACH FL 33060		83			
			84 (	ity		85 Zip Code
44 Oursugat	to the previous of Continue C17 Off	22 april C17 1500 Florido Ctatut	an the should be	mad aar	poration submits this statement for the purp	FL 69 210 Code
SIGNATURE	Signary c, typed of printed name of registered ag	ent and tile if applicable. (NOT ID DIRECTORS	E: Registered Agent s	gnature requ	ired when reinslating)  ADDITIONS/CHANGES TO OFFICER	1/08/97 DATE S AND DIRECTORS IN 12
TITLE	\$D	DELETE	1.1 TITLE	1		Change Addition
NAME	GATES, CAROLE		1.2 NAME			
STREET ADDRESS	1501 NW 64TH AVE.		1.3 STREET AD	RESS		
CITY-ST-ZIP	MARGATE FL	· · _ · _ · _ · _ · _ · _ · _ · _	1.4 CITY-ST-ZIP			
TITLE	VD	☐ DELETE	2.1 TITLE			Change Addition
NAME	BUEHLER, JOE		2.2 NAME			
STREET ADDRESS	9900 NW 38TH ST CORAL SPRINGS FL		2.3 STREET ADI			
CITY-ST-ZIP TITLE	TD	DELETE	2. 4 CiTY - ST - ZiP 3.1 TITLE			Change Addition
NAME	MCDERMOTT, MARLENE	L petert	32 NAME			Ontarigo Addition
STREET ADDRESS	1058 WEST RIVER DRIVE		3.3 STREET ADDRESS			
CITY-ST-ZIP	MARGATE FL		3.4 CITY-ST-2			
TITLE	PD	DELETE	4.1 TITLE			Change Addition
NAME			_			
NAME	MURPHY, VINCENT		4. 2 NAME	ĺ		
	3953 CARAMBOLA CIR N		4. 2 NAME 4.3 STREET ADI	PRESS		
STREET ADDRESS				- 1		
STREET ADDRESS CITY-ST-ZIP FITLE	3953 CARAMBOLA CIR N	☐ DELETE	4.3 STREET ADI 4.4 CITY-ST-Z 5.1 TITLE	- 1		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	3953 CARAMBOLA CIR N		4.3 STREET ADI 4.4 CITY-S1-Z 5.1 TITLE 5.2 NAME	Р		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	3953 CARAMBOLA CIR N		4.3 STREET ADI 4.4 CITY-ST-Z 5.1 TITLE 5.2 NAME 5.3 STREET ADI	P		☐ Change ☐ Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	3953 CARAMBOLA CIR N		4.3 STREET ADI 4.4 CHY-S1-Z 5.1 THLE 5.2 NAME 5.3 STREET ADI 5.4 CHY-ST-Z 6.1 THLE	P		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	3953 CARAMBOLA CIR N	☐ DELETE	4.3 STREET ADI 4.4 CITY-ST-Z 5.1 TITLE 5.2 NAME 5.3 STREET ADI 5.4 CITY-ST-Z 6.1 TITLE 6.2 NAME	P PRESS P		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	3953 CARAMBOLA CIR N	☐ DELETE	4.3 STREET ADI 4.4 CHY-S1-Z 5.1 THLE 5.2 NAME 5.3 STREET ADI 5.4 CHY-ST-Z 6.1 THLE	P DRESS		

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 or lam 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 MARLENE MCDERMOTT

GNATURE:

Malene

942-2242