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Feb 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 734829 (5)

1. Corporation Name

OUR LADY QUEEN OF HEAVEN WOMEN'S GUILD, INCORPORATED



Principal Place of Business

Mailing Address

1400 SOUTH STATE ROAD 7
NORTH LAUDERDALE FL 33068

1400 SOUTH STATE ROAD 7
NORTH LAUDERDALE FL 33068-4602

3. Date Incorporated or Qualified
01/21/1976

3a. Date of Last Report
06/04/1996

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-1580993

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23

28

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24

25

29

30

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

CARIDI, CAROLINE
1400 SOUTH STATE ROAD 7
OUR LADY QUEEN OF HEAVEN WOMEN'S GUILD
NORTH LAUDERDALE FL 33068

81 Name

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

83 Same as previous

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 familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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 STEIN, SANDY
STREET ADDRESS 6416 BRAEBURN
CITY-ST-ZIP NORTH LAUDERDALE FL 33068 DELETE

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

TITLE VPD
NAME MONROE, GERTRUDE
STREET ADDRESS 6501 SW 8TH COURT
CITY-ST-ZIP NORTH LAUDERDALE FL 33068 DELETE

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

TITLE SD
NAME SOUSA, CECELIA
STREET ADDRESS 1425 SW 74TH AVENUE
CITY-ST-ZIP NORTH LAUDERDALE FL 33068 DELETE

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

TITLE TD
NAME CARIDI, CAROLINE
STREET ADDRESS 2650 WEST GULF BOULEVARD #159
CITY-ST-ZIP POMPANO BEACH FL 33064 DELETE

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

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

14. I do 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:

SIGNATURE REQUIRED Caroline Caridi 2/1/97 954-941-8218

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0025747

CR2E037 (9/96)