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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)