

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 735712

1. Corporation Name

ST. FRANCIS RESIDENCE, INC.

Principal Place of Business

6200 COURTNEY CAMPBELL CAUSEWAY  
SUITE 100  
TAMPA FL 33607  
US

Mailing Address

6200 COURTNEY CAMPBELL CAUSEWAY  
SUITE 100  
TAMPA FL 33607  
US

FILED  
Jul 20, 1999 8:00 am  
Secretary of State

07-20-1999 90004 010 \*\*\*\*61.25

5 590904-90004-10 4 \*



2. Principal Place of Business

21 19329 U.S. Hwy 19 N

Suite, Apt. #, etc.

22 100

City & State

23 Clearwater, FL

Zip Country

24 33764 25 USA

2a. Mailing Address

26 19329 U.S. Hwy 19 N

Suite, Apt. #, etc.

27 100

City & State

28 Clearwater, FL

Zip Country

29 33764 30 USA

3. Date Incorporated or Qualified

05/03/1976

4. FEI Number

59-1631325

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

WATTS, HOWARD  
6200 COURTNEY CAMPBELL CAUSEWAY  
SUITE 100  
TAMPA FL 33607

10. Name and Address of New Registered Agent

81 Name Joanne Olvera Lighter  
82 Street Address (P.O. Box Number is Not Acceptable)  
19329 U.S. Hwy 19 North  
83 Suite 100  
84 City Clearwater FL 85 Zip Code 33764

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

Joanne Olvera Lighter

Joanne Olvera Lighter

7/12/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE SD  
NAME PITISCI, GILBERT  
STREET ADDRESS 3003 W DR. MARTIN LUTHER KING JR BLVD  
CITY-ST-ZIP TAMPA FL 33607 ☒ DELETE

TITLE AS  
NAME CURD, GILIAN  
STREET ADDRESS 1200 7TH AVE SO  
CITY-ST-ZIP ST PETERSBURG FL ☒ DELETE

TITLE TD  
NAME CHAWK, GARY  
STREET ADDRESS 3001 W. MARTIN LUTHER KING JR. BLVD.  
CITY-ST-ZIP TAMPA FL 33607 ☒ DELETE

TITLE EVP  
NAME SCOTT, CHARLES  
STREET ADDRESS 3003 W. DR. MARTIN LUTHER KING JR. BLVD.  
CITY-ST-ZIP TAMPA FL 33607 ☒ DELETE

TITLE PD  
NAME MALLAH, ISAAC  
STREET ADDRESS 3003 W. DR. MARTIN LUTHER KING JR BLVD  
CITY-ST-ZIP TAMPA FL ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P  
1.2 NAME Lighter, Joanne Olvera  
1.3 STREET ADDRESS 19329 U.S. Hwy 19 N. - Suite 100  
1.4 CITY-ST-ZIP Clearwater FL 33764 ☐ Change ☒ Addition

2.1 TITLE ST  
2.2 NAME GALATRO, Ann  
2.3 STREET ADDRESS 19329 U.S. Hwy 19 N. - Suite 100  
2.4 CITY-ST-ZIP Clearwater, FL 33764 ☐ Change ☒ Addition

3.1 TITLE  
3.2 NAME (see Attached List)  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☒ Addition

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

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

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

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, with all other like empowered.

SIGNATURE:

Joanne Olvera Lighter  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-12-99

Date

Daytime Phone #

CR2E037 (5/99)

590904-90004-10  
735712

Add/Changes to Officers and Directions in Question # 12

3. General Minister/ Trustee  
**Margaret Mary Kimmins, O.S.F.**  
Franciscan Sisters of Allegany  
St. Elizabeth Motherhouse  
115 East Main Street  
Allegany, NY 14706
4. Trustee  
**Marcie Biddleman**  
736 71st Avenue North  
St. Petersburg, FL 33702
5. Trustee  
**Lucy Cardet, O.S.F.**  
Franciscan Sisters of Allegany  
Martha/Mary House  
138 NE 111th Street  
Miami Shores, FL 33161
6. Trustee  
**Joan M. Carter, M.D.**  
14517 Bruce B Downs, Suite #101  
Tampa, FL 33613
7. Trustee  
**Jorge Gross**  
Price Waterhouse Cooper  
200 S. Biscayne Blvd., Suite #700  
Miami, FL 33131
8. Trustee  
**Odette Haddad, O.S.F.**  
Franciscan Sisters of Allegany  
3939 Shoreside Circle  
Tampa, FL 33624
9. Trustee  
**Maureen Clare Hall, O.S.F.**  
Immaculate Conception Convent  
152 Constant Spring Road #1654  
Kingston 8, Jamaica, West Indies
10. Trustee  
**Guy King**  
101 S. Franklin Street, Suite #201  
Tampa, FL 33702
11. Trustee  
**Most Rev. Robert N. Lynch**  
6363 9th Avenue North  
P.O. Box 40200  
St. Petersburg, FL 33743
12. Trustee  
**Rudy Michaud**  
During Winter:  
4717 Dolphin Cay #602  
St. Petersburg, FL 33711  
  
During Summer:  
402 Chestnut Mountain Dr  
Rabun Gap, GA 30568
13. Trustee  
**James A. Murman, Esq.**  
Barr Murman Tonelli Herzfeld Rubin, P.A  
201 East Kennedy Blvd  
Tampa, FL 33609
14. Trustee  
**Gladys Sharkey, O.S.F.**  
St. Anthony's Convent  
631 11th Street North  
St. Petersburg, FL 33705-1409