

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90290 047 ****61.25

DOCUMENT # N04000003141

1. Entity Name
ST. ANN PLACE FOUNDATION, INC.



Principal Place of Business
2107 N DIXIE HWY
WEST PALM BEACH, FL

Mailing Address
2107 N DIXIE HWY
WEST PALM BEACH, FL

60028178



2. Principal Place of Business

3. Mailing Address

515 N. Flagler Drive
Suite, Apt. #, etc.

P.O. Box 4297
Suite, Apt. #, etc.

Suite 300P

Suite, Apt. #, etc.

City & State

City & State

West Palm Beach, FL

West Palm Beach, FL

Zip 33401

Country US

Zip 33402

Country US

03082006

Chg-NP

CR2E037 (11/05)

4. FEI Number

51-0503043

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHOPIN, L. FRANK
ONE N CLEMATIS STREET
WEST PALM BEACH, FL 33401

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
515 N. Flagler Drive
Suite 300 P
City
West Palm Beach FL Zip Code 33401

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME MURTAGH, FATHER SEAMUS ☐ Delete
STREET ADDRESS 2107 N DIXIE HWY
CITY - ST - ZIP WEST PALM BEACH, FL

TITLE VD
NAME HUDON, SISTER MARY OLIVER, SSND ☐ Delete
STREET ADDRESS 310 N OLIVE AVE
CITY - ST - ZIP WEST PALM BEACH, FL 33401

TITLE TD
NAME SMITH, LESLY ☐ Delete
STREET ADDRESS 300 CHAPEL HILL RD
CITY - ST - ZIP PALM BEACH, FL 33480

TITLE SD
NAME CHOPIN, L. FRANK ESQ ☐ Delete
STREET ADDRESS ONE N. CLEMATIS STREET
CITY - ST - ZIP WEST PALM BEACH, FL 33401

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/30/06