

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N06262

1. Entity Name

CATHOLIC CHARITIES OF THE DIOCESE OF PALM BEACH,

FILED
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90119 014 *****70.00

Principal Place of Business

Mailing Address

9995 NORTH MILITARY TRAIL
PALM BEACH GARDENS FL 33410

P.O. BOX 109650
PALM BEACH GARDEN FL 33410
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2470479

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FITZGERALD, J. PATRICK
189 BRADLEY PLACE
PALM BEACH FL 33480

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ~~VP~~
NAME ANDERSON, CHICKIE
STREET ADDRESS 4112 SHORELAND DRIVE
CITY-ST-ZIP VERO BEACH FL ☐ Delete

TITLE President ☒ Change ☐ Addition
NAME Anderson, Marie
STREET ADDRESS 2080 55th Avenue
CITY-ST-ZIP 32966

TITLE TD
NAME O CONNELL BRIAN
STREET ADDRESS P.O. BOX 014626
CITY-ST-ZIP WEST PALM BCH FL ☒ Delete

TITLE Treasurer
NAME Dominick Pastore
STREET ADDRESS 892 SW Wasena Ave.
CITY-ST-ZIP Sebastian, FL 32958 ☐ Change ☒ Addition

TITLE PD
NAME HERRICK, JOHN
STREET ADDRESS 15100 PALM WOOD ROAD
CITY-ST-ZIP PALM BEACH GARDENS FL ☒ Delete

TITLE Vice President
NAME William Muir
STREET ADDRESS 1800 S. Ocean Blvd, Unit 5D
CITY-ST-ZIP Boca Raton, FL 33432 ☐ Change ☒ Addition

TITLE SD
NAME HELEN LEWIS
STREET ADDRESS 114 RUSSLYN DR.
CITY-ST-ZIP WEST PALM BCH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 33405 ☒ Change ☐ Addition

TITLE ED
NAME SCHUTZ, MADELINE
STREET ADDRESS 301 CHURCHILL RD
CITY-ST-ZIP W. PALM BCH FL 33405 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

12. 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 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:

Madeline Schutz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Madeline Schutz, Exec Director

1-8-2001 561-775-9560

Date

Daytime Phone #

CR2E037 (10/00)