


2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 11, 2003 8:00 am
Secretary of State
08-11-2003 90279 015 ****70.00

DOCUMENT # N12205

1. Entity Name
LOURDES FOUNDATION, INC.



Principal Place of Business
**315 SOUTH FLAGLER DRIVE
W. PALM BEACH FL 33401**

Mailing Address
**315 SOUTH FLAGLER DRIVE
W. PALM BEACH FL 33401**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2632080**

Applied For
Not Applicable

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

~~DENNEHY, MARY ANNE~~
~~315 SOUTH FLAGLER DR~~
~~W. PALM BEACH FL 33401~~

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. 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 _____

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	SHAWN-BERNADETTE, SIS M.	
STREET ADDRESS	ST.THERESA'S MOTHERHOUSE	
CITY-ST-ZIP	GERMANTOWN NY 12526	
TITLE	CD	<input type="checkbox"/> Delete
NAME	MCAHON, JOHN R.	
STREET ADDRESS	370 SW 3RD STREET	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	DENNEHY, SISTER MARY A	
STREET ADDRESS	315 SOUTH FLAGLER DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	REGAN, FIDELIS M SIST	
STREET ADDRESS	315 SOUTH FLAGLER DRIVE	
CITY-ST-ZIP	W.PALM BEACH FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	DALY, JAMES J.	
STREET ADDRESS	1055 FRANKLIN AVE. SUITE 102	
CITY-ST-ZIP	GARDEN CITY NY 11530	
TITLE	AS	<input type="checkbox"/> Delete
NAME	KONCOSKI, JOSEPH R	
STREET ADDRESS	315 SOUTH FLAGLER DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	

TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Veilleux, Sister Anthony de Lourdes	
STREET ADDRESS	600 Woods Road	
CITY-ST-ZIP	Germantown, NY 12526	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Pereira, Sister M. Teresa Stephen	
STREET ADDRESS	600 Woods Road	
CITY-ST-ZIP	Germantown, NY 12526	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Krassner, Albert	
STREET ADDRESS	450 South Ocean Blvd	
CITY-ST-ZIP	Manalapan, FL 33462	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bowden, Sister M. Philip Ann	
STREET ADDRESS	42-41 201st Street	
CITY-ST-ZIP	Bayside, NY 11361	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Purcell, Martin	
STREET ADDRESS	435 Brazilian Avenue	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Koncoski, Joseph R	
STREET ADDRESS	315 S. Flagler Drive	
CITY-ST-ZIP	West Palm Beach, FL 33401	

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: SR MARY ANNE DENNEHY TREASURER

7/31/03 561 655-8549

CR2E037 (4/03)

Attachment

10110786

N12205

Lourdes Foundation, Inc.

2003 Not-for-Profit Corporation Uniform Business Report

Document # N12205

FEI Number 59-2632080

11. ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS IN BOX 10 (Continued)		
Title	D	X Addition
Name	Foster, Mary Kathleen	
Street Address	13650 Columbine Avenue	
City-ST-Zip	Wellington, Florida 33414	
Title	D	X Addition
Name	Murphy, Thomas J., Dr.	
Street Address	10683 Avenue of the PGA	
City-ST-Zip	Palm Beach Gardens, Florida 33418	
Title	D	X Addition
Name	Flynn, Sister M. Seán Damien	
Street Address	21 Ferncliff Drive	
City-ST-Zip	Rhinebeck, New York 12572	
Title	D	X Addition
Name	Brown, Sister Ann E.	
Street Address	600 Woods Road	
City-ST-Zip	Germantown, New York 12526	
Title	D	X Addition
Name	Raymond, Sister M. Joseph Catherine	
Street Address	646 Woods Road	
City-ST-Zip	Germantown, New York 12526	
Title	D	X Addition
Name	Henderson, Charles F.	
Street Address	231 Via Las Brisas	
City-ST-Zip	Palm Beach, Florida 33480	
Title	D	X Addition
Name	Daly, Beth	
Street Address	464 Shawmut Avenue	
City-ST-Zip	Boston, Massachusetts 02118	
Title	D	X Addition
Name	Gapstur, Lenne	
Street Address	11437 Shady Oaks Lane	
City-ST-Zip	North Palm Beach, Florida 33408	