FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	1000					_
DOCUMENT # N42426 (9)						
CATHO	DLIC ELDERLY SERVICES.	INC.				
Principal Place of Business Mailing Address					- I TODAHAT DIN YARIA MATII BIRTIA HILIS DINI DIZAK DIDIN BADII SADIA BIRDI BIRDI BIRDI BIRDI BIRDI BIRDI BIRDI	
4740 N STATE ROAD 7 4740 N STATE ROAD 7						3. Date Incorporated or Qualified
BLDG #C - SUITE #100 LAUDERDALE LAKES FL 33319 BLDG #C - SUITE #100 LAUDERDALE LAKES FL 33319 LAUDERDALE LAKES FL 33319			2240			03/11/1991
US US			3315			4. FEI Number Applied For
2 Principal P	lace of Business	2a. Mailing Address				NOT APPLICABLE Not Applicable
21	lace of Edsirioss	26	⊢ *			5. Certificate of Status Desired Security Securi
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	 			Election Campaign Financing \$5.00 May Be
22						Trust Fund Contribution Added to Fees
23	u	— ·	28 State			7. Is this nonprofit corporation a homeowners association?
Zip	Country	Zip	Zip Country			8. This corporation owes or has paid the current year Intangible
24	9. Name and Address of Curre	29	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
	S. Hallie and Address of Colle	ill vediatelen vitellt	-	81	Name	10. Harrie and Address of New Registered Agent
FITZGERALD, J. PATRICK				82	Street Addr	ress (P.O. Box Number is Not Acceptable)
110 MERRICK WAY, SUITE 3-B			J		Ollogi Addi	ress (r.o. box rumber is not Acceptable)
CORAL GABLES FL 33134				83		
			- [84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authoragent. I am familiar with, and accept the obligations of, Section 617.0503, Florida.					-named corp	
agent. La	egistered agent, or both, in the Stat im familiar with, and accept the obli	e of Florida. Such change was gations of, Section 617.0503, F	autnorized Iorida Stati	utes	tne corporat s.	tion's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature typed or printed name of registered a	cent and title if explicable (NO	TF Stanistered	i Ana	ent signature, requir	ired when reinstaling) DATE
12.		ND DIRECTORS	13.		- In angle accordance	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	SD	DELETE	1.1 191	TLE		Change Addition
NAME	JOHNSON, PAUL		1.2 NA			
STREET ADDRESS	726 NE 1 AVE MIAMI FL		1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		- 1	
CITY-ST-ZIP TITLE	PO	DELETE		2.1 TITLE		☐ Change ☐ Addition
NAME	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2.2 NA	ME		
STREET ADDRESS	6710 LE JEUNE RD.		2.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	☐ DELETE		2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
TITLE NAME	D Vaughan, John J.			3.2 NAME		Change Addition
STREET ADDRESS	9401 BISCAYNE BLVD.			3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI SHORES FL		3.4. CI	ITY-S	ST-ZIP	
TITLE	EVD	DELETE		4.1 TITLE		☐ Change ☐ Addition
NAME	HONOLD, THOMAS G.			4. 2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS DITY-ST-ZIP	C/O 1050 NE 125TH ST N MIAMI FL			4.3 STREET ADDRESS 4.4 City-St-Zip		
TITLE	VTD	DELETE		5.1 TITLE		☐ Change ☐ Addition
NAME	HENNESSY, WILLIAM		5.2 NA	ME		
STREET ADDRESS	C/O 9401 BISCAYNE BLVD		5.3 ST	REET	ADDRESS	
CITY-ST-ZIP	MIAMI SHORES FL	DELETE	5.4 CIT		r-ZIP	Change Addition
TITLE	D Estevez, Feupe	L'I DETEIR	6.1 TIT 6.2 NA			Li Change Li Addition
STREET ADDRESS	1111 SW 107 AVE.				ADDRESS	
CITY OF TIP	MIAMI FI				T 7ID	

14. 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: Thoman

Horald Thomas G Honold

2/18/98

FILED

Apr 23 1998 8:00am

Secretary of State

305 891-8850 x6203 CH2E037 (1097)