

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N46639

1. Entity Name

FRANCISCAN SISTERS OF ALLEGANY RESIDENCE OF MIAM

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90018 027 ****61.25

Principal Place of Business	Mailing Address
REGION III OFFICE 631 11TH STREET NORTH ST PETERSBURG FL 33705 US	REGION III OFFICE 631 11TH STREET NORTH ST PETERSBURG FL 33705-1409 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
65-0331629	Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHARKEY, SISTER G
REGION III OFFICE
631 11TH STREET NORTH
ST PETERSBURG FL 33705

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 _____ (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																								
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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: Sister M. Mary Kimmins SISTER G. SHARKEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hall 727-824-0957
Date Daytime Phone #

CR2E037 (9/99)