2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2011
Secretary of State

DOCUMENT# N49062

Entity Name: ST. LUKE'S CENTER, INC.

Current Principal Place of Business:

7707 NW 2ND AVE
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

1505 NE 26 ST
WILTON MANORS, FL 33305

New Mailing Address:

FEI Number: 59-1279497 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FITZGERALD, J. PATRICK
110 MERRICK WAY
SUITE 3-B
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD
Name: WENSKI, THOMAS G REV
Address: 9401 BISCAYNE BLVD
City-St-Zip: MIAMI SHORES, FL

Title: TD
Name: CASCIATO, MICHAEL A
Address: 9401 BISCAYNE BLVD
City-St-Zip: MIAMI SHORES, FL 33138

Title: SD
Name: MARIN, REV TOMAS M
Address: 9401 BISCAYNE BLVD
City-St-Zip: MIAMI SHORES, FL 33138

Title: CEO
Name: TURCOTTE, RICHARD PH.D
Address: 1505 NE 26 ST
City-St-Zip: WILTON MANORS, FL 33138

Title: VSD
Name: SERRANO, JULIAN ED.D
Address: 1505 NE 26 ST
City-St-Zip: WILTON MANORS, FL 33305

Title: CAO
Name: LIZETH, CAMARENA
Address: 1505 NE 26 ST
City-St-Zip: WILTON MANORS, FL 33023

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: REV. RICHARD TURCOTTE CEO 02/16/2011

Electronic Signature of Signing Officer or Director — Date