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

## DOCUMENT # N93000001716



**FILED** Jan 21, 2003 8:00 am § Secretary of State

SACRED DE PAUL	HEART C ., INC.	ONFERENCE, SOCI	ETY OF ST. VINCEN	r	A HILL	)	1-21-2003 700	30 037 *** 70	,,,,,
Principal Place of Business 701 S.W. 6TH ST. OKEECHOBEE FL 34974			Mailing Address 701 S.W. 6TH ST. OKEECHOBEE FL 34974			. 70007474			
2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State		. /	4. FEI Number <b>59-1841673</b> Applied For		· · · · · · · · · · · · · · · · · · ·	
Zíp	***.	Country	Zip	Cour	ntry	5. Certificate of Sta	atus Desired [	\$8.75 Ad	
	6. Name	and Address of Current	Registered Agent			7. Name and Addr	ess of New Regis		
CARANC	AV ENIDE	DTO 7			Name				
Cabansay, Edilberto Z 2361 Se 27th Street				Street Address (		(P.O. Box Number is N	ot Acceptable)		***
OKEECHOBEE FL 34974				r			· · · · · · · · · · · · · · · · · · ·		
				-	City		<u></u>	FL Zip Cod	le
8. The above named entity submits this statement for the purpose of changing its re					d office or registe	ered agent, or both, in the	he State of Florida.		and accept
the obliga	ations of regist	tered agent.		_	Ü				are decept
SIGNATURE	Edil	berto Z. Ka	bansay - V/T				Janua	ry 15, 2	2003
orani ironi.	Signature, typed	or printed name of registered agent		E: Registered	Agent signature require	d when reinstating)	******	DATE	, <del>,,,,,</del>
	ER E NOM		9 Floation Co.						
	LIFE MOM	: FEE IS \$61.25	9. Election Car Trust Fund 0			\$5.00 May Be Added to Fees		Check Payable epartment of S	
10.	*	OFFICERS AND DIF	Trust Fund (		n. 🗆		Florida D	epartment of S	State
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10.	DP, HARWAS,	OFFICERS AND DIF	Trust Fund (	11. TITLE NAME	n. 🗆	Added to Fees	Florida D	epartment of S	State 10
10. TITLE NAME	DP HARWAS, 2245 SW 3 OKEECHO	OFFICERS AND DIF	Trust Fund (	11. TITLE NAME	ADDRESS	Added to Fees	Florida D	epartment of S	State 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:** 

Edilberto Zi Cabansay RED

January 15, 2003

863-763-3727