

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90157 008 ****70.00

DOCUMENT # N93000003648

1. Corporation Name

OUR LADY OF MOUNT CARMEL FREE CATHOLIC CHURCH, I
NO.

Principal Place of Business

6012 NW 9TH COURT
MARGATE FL 33063
US

Mailing Address

565 NW 87TH WAY
CORAL SPRINGS FL 33071
US



2. Principal Place of Business

21 2445 SW 18 TERRACE

2a. Mailing Address

26 2215 S FEDERAL HWY

Suite, Apt. #, etc.

22 #1010

Suite, Apt. #, etc.

27 STE 54

City & State

23 FT. LAUDERDALE FL

City & State

28 FT. LAUDERDALE, FL

Zip

24 33315

Country

25 BROWARD

Zip

29 33316

Country

30 BROWARD

3. Date Incorporated or Qualified

08/12/1993

4. FEI Number

65-0458855

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

10. Name and Address of New Registered Agent

81 Name

BISHOP JOHN J. SPICER

82

2445 SW 18TH TERRACE

83

APT 1010

84

FT. LAUDERDALE FL 33316

9. Name and Address of Current Registered Agent

VELIYATHIL, REV. P
565 NW 87TH WAY
CORAL SPRINGS FL 33071

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE PD
NAME SHEFFIELD, GLENN
STREET ADDRESS 3320 BANKS RD #202
CITY-ST-ZIP MARGATE FL 33063
☒ DELETE

TITLE D
NAME WERRELEIN, KARL
STREET ADDRESS 8742 NW 50TH DR
CITY-ST-ZIP CORAL SPRINGS FL 33067
☒ DELETE

TITLE D
NAME BERGSTROM, ROSE
STREET ADDRESS 609 NW 66TH AVE
CITY-ST-ZIP MARGATE FL 33063
☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME BISHOP JOHN J. SPICER
1.3 STREET ADDRESS 2445 SW 18 TERR. #1010
1.4 CITY-ST-ZIP FT. LAUDERDALE FL 33315
☒ Change ☐ Addition

2.1 TITLE D
2.2 NAME FR. DOMINIC PIRO
2.3 STREET ADDRESS 2445 SW 18 TERR #1010
2.4 CITY-ST-ZIP FT. LAUDERDALE FL 33315
☒ Change ☐ Addition

3.1 TITLE D
3.2 NAME KAREN L. GEMIGNANI
3.3 STREET ADDRESS 5780 PLANTATION RD
3.4 CITY-ST-ZIP PLANTATION FL 33317
☒ Change ☐ Addition

4.1 TITLE
4.2 NAME FR. ANDREW ZAHAREK
4.3 STREET ADDRESS 2742 NE 14TH ST.
4.4 CITY-ST-ZIP FT. LAUDERDALE, FL. 33304
☐ Change ☒ Addition

5.1 TITLE
5.2 NAME MRS. CARL PIRO
5.3 STREET ADDRESS 404 CANYON DR So.
5.4 CITY-ST-ZIP LEHIGH ACRES, FL. 33936
☐ Change ☒ Addition

6.1 TITLE
6.2 NAME MRS. ANTHONY KELLY
6.3 STREET ADDRESS P.O. Box 1056
6.4 CITY-ST-ZIP LEHIGH ACRES, FL. 33970
☐ Change ☐ Addition

14. 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 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, with all other like empowered.

SIGNATURE: Bishop John J. Spicer BISHOP JOHN J. SPICER 3/28/99 954 761-5784
DATE DAYTIME PHONE #

CR2E037 (11/98)