FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION 'ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #

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FILED

Feb 03 1998 8:00am

Secretary of State

HOLY CROSS SUBSIDIZED RETIREMENT HOUSING CENTER, INC.									
Principal Place of Business Mailing Address						. Londetrafe eine tatit, mentt antil auftt antil nafel (189) 11818 11818 1181			
1591 KIRK RD. 1591 KIRK RD. WEST PALM BEACH FL 33406 WEST PALM BEACH FL 33406			33406			3. Date Incorporated or Qualified 03/04/1994			
						4. FEI Number Applied For			
2 District	New of Business	To Maritima Antonia				65-0734977 Not Applicabl			
2. Principal Place of Business 2a. Malfing Address 21						5. Certificate of Status Desired S8.75 Additional Fee Required			
Suite, Apt. #, etc.						6. Election Campaign Financing \$5.00 May Be			
22 27 City & State City & State						Trust Fund Contribution			
City & State City & State						7. Is this nonprofit corporation a homeowners association?			
Zip Country		Zip				This corporation owes or has paid the current year Intangible			
24	25	29	30	•		Personal Property Tax due June 30. Yes No			
	9. Name and Address of Current					10. Name and Address of New Registered Agent			
				81 N	lame				
BREZNE 9311 YE	N, REV. MICHAEL A ARI ING			82 S	treet Addre	dress (P.O. Box Number is Not Acceptable)			
	ORTH FL 33467			83	83				
				84 C	*IL.	for 75 Code			
				04	ity	FL 85 Zip Code			
11. Pursuant office or ragent. I a	V New Tone	hould)U	~~	<i>∽ /,</i>	prations submits this statement for the purpose of changing its registered process of changing its registered accept the appointment as registered 1/11/98			
12.	Agriculture, typed or printed name of registered agent OFFICERS AND		TE: Register	d Agent si	gnature required	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP OFFICERS AND	DELETE	1,17	ITI F		Change Addition			
NAME	BREZNEN, REV. MICHAEL		1.2 N		1				
STREET ADDRESS	9311 YEARLING			TREET ADD	RESS				
CITY-ST-ZIP	LAKE WORTH FL 33467		- 1	ITY-ST-ZI	į.				
TITLE	DV	☐ DELETE	2.1 T			Change Addition			
NAME	COUGHLIN, JOHN		2.21	AME					
STREET ADDRESS	4704 LUCERNE LAKES BLVD.,	APT. 101	2.3 9	TREET ADD	RESS				
CITY-ST-ZIP	LAKE WORTH FL 33467		2. 41	CITY-ST-Z	IP				
TITLE	ĎŤ	☐ DELETE	3.1 T	ITLE		☐ Change ☐ Addition			
NAME	HOFFER, RANDAL		3.2 N	AMÉ					
STREET ADDRESS	308 PINEHURST RD		3.3 S	TREET ADD	ress				
CITY-ST-ZIP	PALM SPRINGS FL 33461			CITY-ST-Z	IP				
TITLE	DS	DELETE	4.1 T			Change Addition			
NAME	GUINN, MARIE		1	IAME					
STREET ADDRESS	3531 D-1 PINETREE COURT			TREET ADD					
CITY-ST-ZIP	LAKE WORTH FL 33463	DELETE		ITY-ST-ZI	P	Change Addition			
TITLE	DICUTED MADTY		5.1 T			☐ Change ☐ Addition			
NAME	RICHTER, MARTY	ICCT	5.2 N						
STREET ADDRESS	2915 APT. B, ASHLEY DRIVE W	(ES)		TREET ADD	- 1				
CITY-ST-ZIP	WEST PALM BEACH FL 33415	▼ DELETE	5.4 C 6.1 T	TY-ST-ZI	P	☐ Change ☐ Addition			
TITLE		NET DETEIG				Change 1 Adultion			
NAME	ROTHSCHILD, WILLIAM 10268 HUNT CLUB LANE		6.2 N		DEE00				
STREET ADDRESS	PALM BEACH GARDENS FL 33	A10		IREET ADD					
City-St-ZiP				TY-ST-ZII		ection 119.07(3)(i). Florida Statutes, I further certify that the information			

4. I hereby cert/ly 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 amaddress.

SIGNATURE.

lusa

u Ceo 1/11/92

965-4622