

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005549

FILED  
Jul 02, 2004  
Secretary of State

Entity Name: ST. ANTHONY'S COMMUNITY HOMES, INC.

**Current Principal Place of Business:**

3628 DAISY AVENUE  
PALM BEACH GARDENS, FL 33410 US

**New Principal Place of Business:**

**Current Mailing Address:**

15652 79TH TERRACE N.  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

FEI Number: 65-0527683

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMITH, DONALD  
11891 US HWY. 1  
NORTH PALM BEACH, FL 33408 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: D ( ) Delete  
Name: KOLAR, JAMES  
Address: 19938 WILKINSON LEAF RD.  
City-St-Zip: TEQUESTA, FL 33469

Title: D ( ) Delete  
Name: SMITH, DONALD  
Address: 11891 U.S. HWY. #1  
City-St-Zip: NORTH PALM BEACH, FL 33418

Title: D ( ) Delete  
Name: SMITH, CYNTHIA  
Address: 15652 79TH TERRACE N.  
City-St-Zip: PALM BEACH GARDENS, FL 33418

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: RECCHIA, SUSAN M  
Address: 185 COVE ROAD  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D (X) Change ( ) Addition  
Name: SMITH, DONALD  
Address: 11891 U.S. HWY. #1  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DONALD SMITH

D

07/02/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date