2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N95000003244



Jan 30, 2006 8:00 am Secretary of State

FILED

DISCIPLES OF MERCY FOUNDATION, INC.							01-30-2006 90069 007 ****61.25				
300 SW 34 TERRACE 300				ng Address SW 34 TERRACE RFIELD BEACH, FL	33442 US		1 1884/101 6/10 16/61		II Br ifi Baira 401	. 1/ 1 /1 8/1/2 1/1	114 6 9 1 111 1
2. Principal Place of Business 3. Ma				Mailing Address							
Suite, Apt. #, etc. Su				Suite, Apt. #, etc.			01272006 _{Cr}	ng-NP	CR2E037	' (11/05)	
City & State C			City & State			4. FEI Number 65-060125	4			plied For t Applicable	
, Zip				Countr Countr		5. Certificate of Status Desired \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
SAUSE, JOHN 300 SW 34 TERRACE						Name Street Address (P.O. Box Number is Not Acceptable)					
DEERFIELD BEACH, FL 33442											
						City FL Zip Code					
8. The above the obligat	e named entity tions of regist	submits this statement for ered agent.	r the purp	oose of changing its	registered office	or register	red agent, or both, in	the State of Flo	orida. I am fa	miliar with,	and accept
SIGNATURE		or printed name of registered agent	and title if an	plicable (NOTF	: Registered Agent sign	sture required	Juhan rainetatino		DATE	·-··	
Filing Fee is \$61.25 9. Election Campaign Financing							\$5.00 May Be		ake check		
	Due by M	lay 1, 2006					Added to Fees		ida Departr		
10.	CD	OFFICERS AND DIF	RECTORS		11.		ADDITIONS/CHANGE	S TO OFFICE		_	
TITLE		OLINIBI OOD		☐ Delete	TITLE					☐ Change	☐ Addition
NAME STREET ADDRESS	- " ''', '				NAME	.					
CITY-ST-ZIP DEERFIELD BEACH, FL 33442					STREET ADDRESS CITY-ST-ZIP	'					
TITLE				☐ Delete	TITLE	 					
NAME	CASALE,	GLORIA		LI Delete	NAME					☐ Change	Addition
STREET ADDRESS					STREET ADDRESS	;					
CITY-ST-ZIP	COOPER	CITY, FL 33026			CITY-ST-ZIP						
TITLE	D			Delete	TITLE	D				Change	Addition
NAME		R, ROMAN J REV			- HAME		gblood, Gilda				_
STREET ADDRESS	2731 SW				STREET ADDRESS		S.W. 44 Terrace				
CITY-ST-ZIP	ł	RDALE, FL 33312		37	CITY-ST-ZIP		ield Beach, FL 3				
TITLE	T	NDM.		Delete	TITLE	Saus	e, John			☐ Change	Addition
NAME STREET ADDRESS	DYKO, NO	. 61ST PLACE			NAME STREET ADDRESS	1 200 0	S.W. 34 Terrace				
CITY-ST-ZIP		C. FL 33319			CITY-ST-ZIP		rfield Beach, FL	33442			
TITLE	Р	-		☐ Delete	TITLE	+ 200				Change	Addition
NAME	GUDINAS	, JOHN		Delete	NAME					Criange	☐ Addition
STREET ADDRESS		KEDGE AVE			STREET ADDRESS	:]					
CITY-ST-ZIP	PORT ST.	LUCIE, FL 33983			CITY-ST-ZIP						
TITLE	VP			☑ Delete	TITLE	VP				Change	Addition
NAME	ALONSO,				NAME	Dyko	Norm NW 61st Place				
STREET ADDRESS		TH LUNA CT. APT 2F DOD, FL 33020			STREET ADORESS	3431	NW 61st Place parac, FL 33319				
CITY-ST-ZIP					CITY-ST-ZIP	1 1 (1)	ははない エレ ブラブコン				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Hause SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John P. Sause

01/27/2006

Date

954-428-6522

Daytime Phone #