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

N95000005093 (8)

THE FRATERNITY OF THE LORD OF MIRACLES, INC.

SARASOTA FL	ASHINGTON DRIVE 34236 Place of Business #, etc.	Mailing Address 236 SOUTH WASHINGTON SARASOTA FL 34236 2a. Mailing Address 26 Suite, Apt. #, etc. 27	N DRIVE		3. Date Incorporated or Qualified 10/25/1995 4. FEI Number 65-0671728 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 7. Is this nonprofit corporation a homeover	\$8.75 Fee Re \$5.00 Added to	pplied For of Applicable Additional equired May Be o Fees
23		28			Yes		
Zip 24	Country 25	Zip 29	Count 30	ry 	This corporation owes or has paid the Personal Property Tax due June 30.	☐ Yes ☐	tangible No
	9. Name and Address of Curre	nt Registered Agent	8	1 Name	10. Name and Address of New Register	ed Agent	
SABA, RICHARD D 2033 MAIN STREET #303 SARASOTA FL 34237			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)	[85] Zip	Code
11. Pursuant office or r	to the provisions of Sections 617.05 egistered agent, or both, in the State	02 and 617.1508, Florida Statut e of Florida. Such change was	tes, the abo authorized t	ve-named cor by the corpora	rporation submits this statement for the purpos ation's board of directors. I hereby accept the	se of changing it appointment as	ts registered registered
SIGNATURE							
	Signature, typed or printed name of registered ag			gent signature requ	ulred when reinstating) DAT		
12.	D OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR	S IN 12 Addition
NAME STREET ADDRESS CITY-ST-ZIP	CARLSTROM, IRASEMA 236 SOUTH WASHINGTON I SARASOTA FL 34236		1,2 NAME	T ADDRESS		Onlings	Auditori
TITLE			2.1 TITLE	34-211		Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	PACHERRES, ALFREDO 22 5712 31ST COURT EAST 23		2.2 NAME	T ADDRESS			
TITLE	D					Change	Addition
NAME	DEL AGUILA, JHENNY		3.2 NAME				
STREET ADDRESS	236 SOUTH WASHINGTON I	DRIVE	3.3 STREE	T ADDRESS			İ
CITY-ST-ZIP	SARASOTA FL 34236		3.4. CITY	ST-ZIP			
TITLE	D					Change	Addition
NAME	DEL AGUILA, GREYS		4. 2 NAM	i			
STREET ADDRESS	236 SOUTH WASHINGTON (DRIVE		T ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34236	- I beles	4.4 CITY-	ST-ZiP		Chana	A diabation
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			ļ
SDIY*SI~ZP			a sauliy-				

6.4 CITY-ST-ZIP 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 of frustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE:

STREET ADDRESS

Change

Addition

FILED

Feb 06 1998 8:00am

Secretary of State

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