

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Mar 08, 2007 08:00 AM
Secretary of State

DOCUMENT # N97000004495

1. Entity Name

**THE BLUE ARMY OF OUR LADY OF FATIMA, FLORIDA,
INCORPORATED**



Principal Place of Business

Mailing Address

**POST OFFICE BOX 10865
POMPANO BEACH FL 33061**

**POST OFFICE BOX 10865
POMPANO BEACH FL 33061**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

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

**GORTH, GERRY
7811 NW 54TH CT.
FORT LAUDERDALE FL 33351**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: **D** ☐ Delete
NAME: **COSTEA, NICHOLAS J**
STREET ADDRESS: **7308 NORTHWEST 58TH COURT**
CITY-STATE-ZIP: **TAMARAC FL 33321**

TITLE: **VD** ☐ Delete
NAME: **FAZZINI, RUDOLPH**
STREET ADDRESS: **617 NORTHWEST 27TH STREET**
CITY-STATE-ZIP: **WILTON MANORS FL**

TITLE: **DT** ☐ Delete
NAME: **NOLEN, DOROTHY**
STREET ADDRESS: **4737 NORTHEAST 25TH AVENUE**
CITY-STATE-ZIP: **FORT LAUDERDALE FL 33308**

TITLE: **SD** ☐ Delete
NAME: **CERAVOLO, JULIA**
STREET ADDRESS: **801 S. FED. HWY., PH 14/APT 1214**
CITY-STATE-ZIP: **POMPANO BEACH FL 33062**

TITLE: **P** ☐ Delete
NAME: **GORTH, GERRY**
STREET ADDRESS: **7811 NW 54 CT**
CITY-STATE-ZIP: **FORT LAUDERDALE FL 33351**

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME: **U000000660417**
STREET ADDRESS: **03/19/07-80025-003 61.25**
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

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

Dorothy M. Nolen **DOROTHY M. NOLEN** 3-5-07 954-772-8623