FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9800001755

Corporation Name

CATHOLIC COMMUNITY FOUNDATION IN THE ARCHDIOCESE OF MIAMI INC.

Country

25

Principal Place of Business								
9401 BISCAYNE BOULEVARD								
MIAMI SHORES FL 33138								

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

Mailing Address

2a. Mailing Address

27

28

29

Zip

Suite, Apt. #, etc.

City & State

9401 BISCAYNE BOULEVARD MIAMI SHORES FL 33138

FILED Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90052 024 ****70.00

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

03/24/1998

	9. Name and Address of Current Registered	Agent	i		10. Name and A	Address of New F	redisteren y	Saur		
			81	Name						
FITZGERALD, J P ESQ 110 MERRICK WAY			82	Street	t Address (P.O. Box Number is Not Acceptable)					
			83							
SUITE 3-B			63			. •	•			
CORAL G	ABLES FL 33134		84	City			·	85 Zip C	ode .	
	<u> </u>						<u> </u>	ابا		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.										
SIGNATURE	Signature, typed or printed name of registered agent and title if applic	able (NOTE: Re	acistered Ager	t signature (equired when reinstating)	_	DATE			
12.	OFFICERS AND DIRECTO		13.	. <u> </u>		CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12	
TITLE	SD	☐ DELETE	1,1 TITLE		5/7/0			Change	Addition	
NAME	KELLY, VINCENT REV.		1.2 NAME				•			
STREET ADDRESS	9401 BISCAYNE BOULEVARD		1.3 STREET	ADDRESS]				·	
CITY-ST-ZIP	MIAMI SHORES FL 33138		1.4 CITY-S	T- ZIP]	*,				
TITLE	PD	DELETE	2.1 TITLE	· -				Change	☐ Addition	
NAME	VAUGHAN, JOHN J REV.		2.2 NAME							
STREET ADDRESS	9401 BISCAYNE BOULEVARD		2.3 STREET	ADDRESS	Į				,	
CITY-ST-ZIP	MIAMI SHORES FL 33138		2, 4 CITY-5	T-ZIP]					
TITLE	VD	DELETE	3.1 TITLE			, , , , , , , , , , , , , , , , , , ,		Change	Addition	
NAME	CATANIA, JOSEPH M		3.2 NAME			•		,		
STREET ADDRESS	A CALL DISCOUNCE DOUBLE BUILDS		3.3 STREET	ADDRESS			•		•	
CITY-ST-ZIP	MIAMI SHORES FL 33138		3.4. CITY- 9	T-ZIP				-		
TITLE		DELETE	4.1 TITLE		0/0	-		Change	Addition	
NAME			4. 2 NAME		MICHAEL SYOL BISE	BIENI	د ع	•		
STREET ADDRESS			4.3 STREE	T ADDRESS	9401 13150	AYNE B	OULEV	aro.		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	MiAMI -	SHORES	1-6	33/	38	
TITLE		DELETE	5.1 TITLE		V/0			Change	Addition	
NAME	·		5.2 NAME		RODGER	5444]	
STREET ADDRESS			5.3 STREE	T ADDRESS	9401 131.				1	
CITY-ST-ZIP			5.4 CITY-S	T-ZIP	Mismi S	HORES	1-2.			
TITLE		☐ DELETE	6.1 TITLE			r .		Change	☐ Addition	
NAME			6.2 NAME					•	}	
STREET ADDRESS				TADDRESS		•		,		
CITY-ST-ZIP		 	6.4 CITY-S		440 07/02/0	Florida Chabita-	16.44.44	in that the le	formation	
14. Lhereby 6	certify that the information supplied with this filing of	toes not qualify for th	ne exempt	ion state	a in Section 119.07(3)(i)	, Fiorida Statutes.	i iumner cem	ny mar une ir	HORMAROH	

Country

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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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brance Baytime Phone #

~2E037 (11/98)

Applied For Not Applicable

8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees