

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732441

**FILED**  
**Aug 22, 2013**  
**Secretary of State**  
**CC8601180988**

**Entity Name:** SOCIETY OF SAINT VINCENT DE PAUL DISTRICT COUNCIL OF  
POMPANO BEACH, INC.

**Current Principal Place of Business:**

2323 N. DIXIE HWY.  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

2323 N. DIXIE HWY.  
POMPANO BEACH, FL 33060

**FEI Number: 59-1580460**

**Certificate of Status Desired: No**

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

MCDERMOTT, MARLENE  
2323 NORTH DIXIE HWY  
POMPANO BEACH, FL 33060 US

*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

**Officer/Director Detail :**

Title PD  
Name TARQUINIO, ROBERT  
Address 8606 NW 59 CT  
City-State-Zip: TAMARAC FL 33321

Title VP  
Name BUEHLER, JOE  
Address 9900 NW 38TH ST  
City-State-Zip: CORAL SPRINGS FL 33065

Title TD  
Name MCDERMOTT, MARLENE  
Address 1058 WEST RIVER DRIVE  
City-State-Zip: MARGATE FL 33063

Title S  
Name MC GUNNESS, BARBARA  
Address 555 N. OCEAN BLVD #42  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

Title VP  
Name GUSTITUS, GUS  
Address 6350 NW 18 ST  
City-State-Zip: MARGATE FL 33063

*I hereby 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 all other like empowered.*

**SIGNATURE: ROBERT TARQUINIO**

**PRES**

**08/22/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date