

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 757034

**FILED**  
**Feb 05, 2014**  
**Secretary of State**  
**CC5450846674**

**Entity Name:** ARCHDIOCESE OF MIAMI ENDOWMENT FUND, INC.

**Current Principal Place of Business:**

9401 BISCAYNE BLVD  
MIAMI SHORES, FL 33138

**Current Mailing Address:**

9401 BISCAYNE BLVD  
MIAMI SHORES, FL 33138

**FEI Number:** 59-2221140

**Certificate of Status Desired:** No

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

FITZGERALD, J. PATRICK ESQ.  
110 MERRICK WAY-SUITE 3-B  
CORAL GABLES, FL 33134 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 CPD  
Name BEIER, THOMAS E  
Address 5055 HAMMOCK LAKE DRIVE  
City-State-Zip: CORAL GABLES FL 33156

Title VCP  
Name ARAZOZA, MARIA  
Address 9600 S.W. 93 AVENUE  
City-State-Zip: MIAMI FL 33176

Title TD  
Name BENSON, WILLIAM G  
Address 6550 N. FEDERAL HIGHWAY, SUITE  
410  
City-State-Zip: FORT LAUDERDALE FL 33308

Title SD  
Name CLANCY, SEAN  
Address 20803 BISCAYNE BLVD, STE 505  
City-State-Zip: AVENTURA FL 33180

*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:** BEIER, THOMAS E

CPD

02/05/2014

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

\_\_\_\_\_  
Date