### 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010136

Entity Name: CATHOLIC HEALTH CARE TRANSITIONS SERVICES, INC.

FILED
Jan 26, 2023
Secretary of State
6162438307CC

# **Current Principal Place of Business:**

3075 N.W. 35TH AVENUE LAUDERDALE LAKES, FL 33311

## **Current Mailing Address:**

4790 N STATE ROAD 7

LAUDERDALE LAKES. FL 33319 US

FEI Number: 45-3717633 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

FITZGERALD, J. PATRICK ESQ.
J. PATRICK FITZGERALD & ASSOCIATES, P.A.
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 CD Title P

Name LAWSON, RALPH E. Name PALLIN, ARISTIDES CEO

Address 6041 NW 74 TERRACE Address CATHOLIC HEALTH SERVICES, INC.

4790 N STATE RD 7

City-State-Zip: PARKLAND FL 33067

City-State-Zip: LAUDERDALE LAKES FL 33319

Title VCSD

Title AS
Name WORLEY, SSJ, ELIZABETH A. SR.

Address ARCHDIOCESE OF MIAMI

Name FITZGERALD, J. PATRICK ESQ.

9401 BISCAYNE BLVD Address J. PATRICK FITZGERALD &

ASSOCIATES, P.A.

City-State-Zip: MIAMI SHORES FL 33138 110 MERRICK WAY SUITE 3B

City-State-Zip: CORAL GABLES FL 33134

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.

Electronic Signature of Signing Officer/Director Detail