

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

DOCUMENT# N12205

**FILED**  
**Feb 05, 2013**  
**Secretary of State**  
**CC1030298005**

**Entity Name:** LOURDES FOUNDATION, INC.

**Current Principal Place of Business:**

315 SOUTH FLAGLER DRIVE  
W. PALM BEACH, FL 33401

**Current Mailing Address:**

315 SOUTH FLAGLER DRIVE  
W. PALM BEACH, FL 33401

**FEI Number:** 59-2632080

**Certificate of Status Desired:** Yes

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

DENNEHY, MARY ANNE  
315 SOUTH FLAGLER DR  
W. PALM BEACH, FL 33401 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            PRES  
Name            LOURDES VEILLEUX, ANTHONY DE  
                  SISTER  
Address        600 WOODS ROAD  
City-State-Zip: GERMANTOWN NY 12526

Title            SECRETARY  
Name            MCDONOUGH, MAUREEN DE  
                  LOURDES SISTER  
Address        315 SOUTH FLAGLER DRIVE  
City-State-Zip: W. PALM BEACH FL 33401

Title            VP  
Name            BROWN, ANN E SISTER  
Address        315 SOUTH FLAGLER DRIVE  
City-State-Zip: W. PALM BEACH FL 33401

Title            TREASURER  
Name            FLAGG, CATHARINE  
Address        315 SOUTH FLAGLER DRIVE  
City-State-Zip: W. PALM BEACH FL 33401

Title            DIRECTOR, CHAIRMAN  
Name            DALY, BETH  
Address        315 SOUTH FLAGLER DRIVE  
City-State-Zip: W. PALM BEACH FL 33401

*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: CATHARINE FLAGG**

**TREASURER**

**02/05/2013**

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

\_\_\_\_\_  
Date