## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13289

Entity Name: CATHOLIC HEALTH SERVICES, INC.

FILED
Jan 30, 2024
Secretary of State
3717344917CC

## **Current Principal Place of Business:**

4790 N STATE RD 7

LAUDERDALE LAKES, FL 33319

## **Current Mailing Address:**

4790 N STATE RD 7

LAUDERDALE LAKES, FL 33319 US

FEI Number: 59-2645139 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: J. PATRICK FITZGERALD, ESQ. 01/30/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VCSD Title CD

Name WORLEY, SSJ, ELIZABETH A SR. Name LAWSON, RALPH E

Address ARCHDIOCESE OF MIAMI Address 6041 NW 74 TERRACE
9401 BISCAYNE BLVD CIT OF A RICHARD FLOROST

City-State-Zip: MIAMI SHORES FL 33138

Title P

Name PALLIN, ARISTIDES CEO

SIGNATURE: ARISTIDES PALLIN

Address CATHOLIC HEALTH SERVICES, INC.

4790 N STATE RD 7

City-State-Zip: LAUDERDALE LAKES FL 33319

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

CEO/PRESIDENT

01/30/2024

Date