

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002278

Entity Name: MALTA PROJECTS OF SOUTHEASTERN FLORIDA, INC.**Current Principal Place of Business:**211 BAL CROSS DRIVE
BAL HARBOUR, FL 33154**Current Mailing Address:**211 BAL CROSS DRIVE
BAL HARBOUR, FL 33154 US**FEI Number: 65-0416447****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WOLFF, MARK JESQ
16401 NW 37TH AVE
OPA LOCKA, FL 33054 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 TREASURER
Name CZERNIEC, TIMOTHY H
Address 808 BRICKELL KEY DRIVE # 808
City-State-Zip: MIAMI FL 33131

Title PRESIDENT
Name CLANCY, SEAN M
Address 211 BAL CROSS DRIVE
City-State-Zip: BAL HARBOUR FL 33154

Title VP
Name GRIFFIN, MICHAEL J
Address 1065 WEEPING WILLOW WAY
City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR
Name FURIA, ARTHUR
Address 1717 N. BAYSHORE DRIVE, SUITE
4057
City-State-Zip: MIAMI FL 33132

Title SECRETARY
Name DA GRACA PINTO, KATHLEEN
Address 3571 N. PROSPECT DRIVE
City-State-Zip: CORAL GABLES FL 33133

Title DIRECTOR
Name WOLFF, MARK JPROF
Address 16401 NW 37TH AVE
City-State-Zip: MIAMI GARDENS FL 33054

Title DIRECTOR
Name AMATURO, WINIFRED J.
Address 3055 HARBOR DRIVE #22012
City-State-Zip: FT.LAUDERDALE FL 33316

Title DIRECTOR
Name KAYAL, MARY L.
Address 6850 SW99TH STREET
City-State-Zip: MIAMI FL 33156

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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: TIMOTHY H.CZERNIEC**TREASURER****01/31/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LAWLESS, PAUL M
Address 1415 FAN PALM ROAD
City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR
Name MCAULIFFE, JOHN
Address 5605 S.FLAGLER DRIVE
City-State-Zip: WEST PALM BEACH FL 33405

Title DIRECTOR
Name DA GRACA PINTO, DEREK
Address 3571 N. PROSPECT DRIVE
City-State-Zip: CORAL GABLES FL 33133

Title DIRECTOR
Name MACAULIFFE, HAWLEY H
Address 5605 S.FLAGLER DRIVE
City-State-Zip: WEST PALM BEACH FL 33405

Title DIRECTOR
Name O'NEILL , PATRICK H. REVEREND
Address 8901 DICKENS AVENUE
City-State-Zip: MIAMI BEACH FL 33154

Title DIRECTOR
Name VISSICCHIO, ANDREW J JR.
Address 2350 NW38TH STREET
City-State-Zip: BOCA RATON FL 33431