

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000006759

**Entity Name:** IMMACULATA LA SALLE HIGH SCHOOL, INC.

**Current Principal Place of Business:**

3601 S MIAMI AVENUE  
MIAMI, FL 33133

**Current Mailing Address:**

3601 S MIAMI AVENUE  
MIAMI, FL 33133

**FEI Number:** 59-1152665

**Certificate of Status Desired:** No

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

FITZGERALD, J PATRICK  
110 MERRICK WAY, SUITE3-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            PRESIDENT  
Name            RIGG, JIM DR.  
Address        9401 BISCAYNE BLVD  
City-State-Zip: MIAMI FL 33138

Title            TREASURER  
Name            CASCIATO, MICHAEL MR.  
Address        9401 BISCAYNE BLVD  
City-State-Zip: MIAMI SHORES FL 33138

Title            VP, SECRETARY  
Name            WORLEY, ELIZABETH SR  
Address        9401 BISCAYNE BLVD  
City-State-Zip: MIAMI FL 33138

Title            TRUSTEE  
Name            DONALD, EDWARDS DR.  
Address        9401 BISCAYNE BLVD.  
City-State-Zip: MIAMI FL 33138

*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: DR. JIM RIGG**

**PRESIDENT**

**01/11/2024**

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

\_\_\_\_\_  
Date