

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000007773

**Entity Name:** ASSOCIATION OF PRIESTS, INC.

**Current Principal Place of Business:**

1501 MAYFAIR ROAD  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

1501 MAYFAIR ROAD  
JACKSONVILLE, FL 32207

**FEI Number: 59-3712648**

**Certificate of Status Desired: No**

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

DESCLEFS, BENOIT F  
1501 MAYFAIR ROAD  
JACKSONVILLE, FL 32207 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 PD  
Name IANNUZZI, JOSEPH  
Address 12124 N. SUPERIOR DRIVE  
City-State-Zip: PARADISE MI 49768

Title TD  
Name BAUER, ED  
Address 16016 NW 78TH AVE  
City-State-Zip: GAINESVILLE FL 32615

Title SECRETARY  
Name MEALY, LINETTE  
Address 4008 FLINTRIDGE DR  
City-State-Zip: IRVING TX 75038

Title TR  
Name SCHAAR, SALLY  
Address 3670 MAPLE ST  
City-State-Zip: ONAWAY MI 49765

*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: SALLY SCHAAR**

**TREASURER**

**02/25/2016**

Electronic Signature of Signing Officer/Director Detail

Date