

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006648

Entity Name: SANTO NINO DEVOTION OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

1224 PINE SAGE
WEST PALM BEACH, FL 33409

Current Mailing Address:

1224 PINE SAGE
WEST PALM BEACH, FL 33409

FEI Number: 65-1110169

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ROSSOW, GERALD ZESQ
4400 PGA BOULEVARD
SUITE 900
PALM BEACH GARDENS, FL 33410 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 SOQUENA, ELVA
Address 1224 PINE SAGE
City-State-Zip: WEST PALM BEACH FL 33409

Title VPD
Name CIOFFI, JUSTINA
Address 5600 N. FLAGLER DRIVE PH 106
City-State-Zip: W. PALM BCH FL 33407

Title SD
Name LANDER, ALMA
Address 11809 GREENBRIAR CIRCLE
City-State-Zip: WELLINGTON FL 33414

Title TD
Name DE GUZMAN, LEONORA T
Address 3365 EIFFEL DRIVE
City-State-Zip: WEST PALM BEACH FL 33417

Title D
Name VERGARA, JANET
Address 267 CYPRESS TRACE
City-State-Zip: ROYAL PALM BEACH FL 33411

Title D
Name GUARDIARIO, JOSE
Address 5294 FOX TRACE
City-State-Zip: W. PALM BCH FL 33417

Title DIRECTOR
Name SABUSAP, ARSENIA P
Address 4105 TORRES CIRCLE
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR
Name VILLANUEVA, ERIC
Address 1034 ASPRI WAY
City-State-Zip: PALM BEACH GARDENS FL 33418

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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: LEONORA T. DEGUZMAN

TREASURER

04/17/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name YABUT, ROSE
Address 5185 FOXHALL NORTH
City-State-Zip: WEST PALM BEACH FL 33417