## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000869

Entity Name: CATHOLIC CHARITIES HOUSING SARASOTA, INC.

**FILED** Feb 13, 2017 **Secretary of State** CC6064443237

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

1000 PINEBROOK RD VENICE, FL 34285

## **Current Mailing Address:**

1000 PINEBROOK RD VENICE, FL 34285

FEI Number: 20-2901940 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DIVITO, JOSEPH A 4514 CENTRAL AVE ST PETERSBURG, FL 33711 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

Date

Officer/Director Detail:

Title Title CD

SMERYK, VOLODYMYR DR ROUTSIS-ARROYO, PETER Name Name 1000 PINEBROOK RD Address 1000 PINEBROOK RD Address

City-State-Zip: VENICE FL 34285 VENICE FL 34285 City-State-Zip:

Title SECRETARY, DIRECTOR Title **VPD** 

Name SWEENEY, JIM Name BUSTER, SR. CATHY

Address **4616 MACKINAW AVENUE** Address 5911 MIDNIGHT PASS ROAD #102

NORTH FORT MYERS FL 33903 City-State-Zip: SARASOTA FL 34242 City-State-Zip:

Title Title D

Electronic Signature of Signing Officer/Director Detail

Name TYLER, PAT ROMILLO, ANA Name

Address 2202 CASEY KEY ROAD 2120 LUCKY STREET Address NOKOMIS FL 34275

City-State-Zip: City-State-Zip: PORT CHARLOTTE FL 33988

Title **PRESIDENT** 

ARAGONA, SHARON B Name 1000 PINEBROOK RD Address VENICE FL 34285 City-State-Zip:

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.

02/13/2017 SIGNATURE: PETER ROUTSIS-ARROYO **BOARD CHAIR**