

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000869

Entity Name: CATHOLIC CHARITIES HOUSING SARASOTA, INC.**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**Officer/Director Detail :**

Title	D
Name	SMERYK, VOLODYMYR DR
Address	1000 PINEBROOK RD
City-State-Zip:	VENICE FL 34285

Title	VPD
Name	BUSTER, SR. CATHY
Address	5911 MIDNIGHT PASS ROAD #102
City-State-Zip:	SARASOTA FL 34242

Title	SECRETARY, DIRECTOR
Name	SWEENEY, JIM
Address	4616 MACKINAW AVENUE
City-State-Zip:	NORTH FORT MYERS FL 33903

Title	D
Name	ROMILLO, ANA
Address	2120 LUCKY STREET
City-State-Zip:	PORT CHARLOTTE FL 33988

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

Title	CEO
Name	PEREIRA, PHILOMENA
Address	1000 PINEBROOK RD
City-State-Zip:	VENICE FL 34285

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: PHILOMENA PEREIRA**CEO****02/26/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date