Number: 26-3262119	Certificate of Status Desired: No
77 WILDLIFE TRAIL LAHASSEE, FL 32312 US	
rent Mailing Address:	

O'ROURKE, KELLY 11077 WILDLIFE TRAIL TALLAHASSEE, FL 32312 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.

	, , , , , , , , , , , , , , , , , , , ,	6	u	
SIGNATURE	: KELLY O'ROURKE			01/10/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRES	Title	VP	
Name	REIFENBERG, STEPHEN	Name	BLOOM, KAREN	
Address	101 S. CONESTOGA LN	Address	11077 WILDLIFE TRAIL	
City-State-Zip:	SOUTH BEND IN 46617	City-State-Zip:	TALLAHASSEE FL 32312	
Title	SEC	Title	Т	
Name	O'ROURKE, KELLY	Name	SAVER, DANIEL	
Address	11077 WILDLIFE TRAIL	Address	11077 WILDLIFE TRAIL	
City-State-Zip:	TALLAHASSEE FL 32312	City-State-Zip:	TALLAHASSEE FL 32312	

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: KELLY O'ROURKE

SECRETARY

01/10/2024

Entity Name: DOMINGO SAVIO INSTITUTE, INC.

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

11077 WILDLIFE TRAIL TALLAHASSEE. FL 32312

Curr

1107 TALL

FEI N

Name and Address of Current Registered Agent:

DOCUMENT# N0800008025

FILED Jan 10, 2024 Secretary of State 6119519845CC

Electronic Signature of Signing Officer/Director Detail

Date