

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000000345

**FILED**  
**Apr 29, 2020**  
**Secretary of State**  
**9764537228CC**

**Entity Name:** CHURCH OF THE RESURRECTION OF OUR LORD CATHOLIC PARISH IN FORT MYERS, INC.

**Current Principal Place of Business:**

8121 CYPRESS LAKE DRIVE  
FORT MYERS, FL 33919

**Current Mailing Address:**

1000 PINEBROOK RD  
VENICE, FL 34285 US

**FEI Number: 59-1539056**

**Certificate of Status Desired: No**

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

DIVITO, JOSEPH A  
4514 CENTRAL AVENUE  
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	TRUSTEE	Title	TRUSTEE, PRESIDENT, TREASURER
Name	KANTOR, ROBERT REV	Name	MCNAMARA, STEPHEN E MSGR.
Address	1000 PINEBROOK ROAD	Address	1000 PINEBROOK ROAD
City-State-Zip:	VENICE FL 34285	City-State-Zip:	VENICE FL 34285
Title	TRUSTEE	Title	VP
Name	SMERYK, VOLODYMYR DR	Name	TONER, OLIVER REV.
Address	1000 PINEBROOK ROAD	Address	1000 PINEBROOK ROAD
City-State-Zip:	VENICE FL 34285	City-State-Zip:	VENICE FL 34285
Title	SECRETARY		
Name	ESPER, MIKE DCN		
Address	1000 PINEBROOK ROAD		
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: VOLODYMYR SMERYK**

**DIRECTOR**

**04/29/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date