

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000002232

Entity Name: DEPARTEMENTO DE CAPELLANIA REGION SUDESTE INC**Current Principal Place of Business:**12621 BALCOMBE RD
ORLANDO, FL 32837**Current Mailing Address:**12621 BALCOMBE RD
ORLANDO, FL 32837**FEI Number:** 47-3283806**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RINCON PARRA, LUIS E
12621 BALCOMBE RD
ORLANDO, FL 32837 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	SD
Name	ROSADO, MARISOL
Address	15660 CR 565 A
City-State-Zip:	CLERMONT FL 34711

Title	TD
Name	LOPEZ, JESUS M
Address	12340 HAMMOCK HILL DRIVE
City-State-Zip:	CLERMONT FL 34711

Title	VD
Name	CARRASQUILLO, PEDRO J
Address	325 SAMUEL STREET
City-State-Zip:	DAVENPORT FL 33897

Title	ED
Name	LABOY, PABLO J
Address	2714 PATRICIA CIRCLE
City-State-Zip:	KISSIMMEE FL 34746

Title	PD
Name	PEREZ, WILFREDO
Address	680 SEIPLE ROAD
City-State-Zip:	AVON PARK ESTATE FL 33825

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: LOPEZ JESUS M

TD

01/04/2016

Electronic Signature of Signing Officer/Director Detail_____
Date