

2018 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:** Yes**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	MEMBER
Name	ROSADO, MARISOL
Address	1717 SUNSET RIDGE DR
City-State-Zip:	MASCOTTE FL 34753

Title	SUB DIRECTOR
Name	MEDERO, NANETTE
Address	684 SE SE "K" AVE
City-State-Zip:	WINTER HAVEN FL 33880

Title	SECRETARY
Name	DELIZ, RUTH
Address	12621 BALCOMBE RD
City-State-Zip:	ORLANDO FL 32837

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

Title	DIRECTOR
Name	TIRADO, JULIO
Address	12621 BALCOMBE RD
City-State-Zip:	ORLANDO FL 32837

Title	PRESIDENT
Name	CARRASQUILLO, PEDRO J CHAPLAIN
Address	12621 BALCOMBE RD
City-State-Zip:	ORLANDO FL 32837

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

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04/27/2018

Electronic Signature of Signing Officer/Director Detail_____
Date