

**2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N20000012169

**Entity Name:** SPIRITIST CENTER FRATERNAL LOVE, INC.

**Current Principal Place of Business:**

115 HICKORY ST.  
SUITE 204 Q  
MELBOURNE, FL 32904

**Current Mailing Address:**

115 HICKORY ST.  
SUITE 204 Q  
MELBOURNE, FL 32904 US

**FEI Number: 85-3681802**

**Certificate of Status Desired: No**

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

BADIGLIAN, LEANDRO  
115 HICKORY ST.  
SUITE 204 Q  
MELBOURNE, FL 32904 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 P  
Name GONCALVES M ROBALLO, ANDREA  
Address 115 HICKORY ST., SUITE 204 Q  
City-State-Zip: MELBOURNE FL 32904

Title VP  
Name LOPES BADIGLIAN, CATIA  
Address 115 HICKORY ST., SUITE 204 Q  
City-State-Zip: MELBOURNE FL 32904

Title DIR  
Name APARECIDA CALDWELL, IARA  
Address 115 HICKORY ST., SUITE 204 Q  
City-State-Zip: MELBOURNE FL 32904

Title DIR  
Name BADIGLIAN, LEANDRO  
Address 115 HICKORY ST., SUITE 204 Q  
City-State-Zip: MELBOURNE FL 32904

*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: LEANDRO BADIGLIAN**

**DIR**

**05/15/2022**

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

\_\_\_\_\_  
Date