

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000007378

**Entity Name:** ST. ANN PLACE OUTREACH CENTER, INC.

**Current Principal Place of Business:**

2107 N. DIXIE HWY  
WEST PALM BEACH, FL 33407

**Current Mailing Address:**

2107 N. DIXIE HWY  
WEST PALM BEACH, FL 33407 US

**FEI Number: 88-3414120**

**Certificate of Status Desired: No**

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

J. PATRICK FITZGERALD, ESQUIRE  
110 MERRICK WAY, SUITE3-B  
CORAL GABLES, FL 33134 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           VPSD  
Name           PESCOSOLIDO, JOHN C  
Address        4406 LACEY OAK DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title           PD  
Name           DELVARD, QUESNEL REVEREND  
Address        ST. ANN CATHOLIC CHURCH  
                  310 N. OLIVE AVENUE  
City-State-Zip: WEST PALM BEACH FL 33401

Title           TREASURER  
Name           D'EMILIO, NICLA  
Address        2107 N. DIXIE HWY  
City-State-Zip: WEST PALM BEACH FL 33407

Title           SECRETARY  
Name           GILDEA, FRANCIS  
Address        2107 N. DIXIE HWY  
City-State-Zip: WEST PALM BEACH FL 33407

*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: JOHN PESCOSOLIDO**

**CHIEF EXECUTIVE  
OFFICER**

**03/15/2024**

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

\_\_\_\_\_  
Date