

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23000009319

Entity Name: LA SOCIETE DES FILLES DU ROI ET SOLDATS DU CARIGNAN, CORP.**FILED**
Feb 08, 2024
Secretary of State
7949916819CC**Current Principal Place of Business:**3915 VILA BELLA DRIVE
SEBRING, FL 33872-2356**Current Mailing Address:**P.O. BOX 8332
SEBRING, FL 33872-0123 US**FEI Number: 93-2906815****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**RACINE, CHRISTINE
3915 VILA BELLA DRIVE
SEBRING, FL 33872-2356 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	DT
Name	HUDON, RICHARD
Address	1995 SUGAR HILL DRIVE SOUTH
City-State-Zip:	CREEDMOOR NC 27522

Title	SECRETARY
Name	ADAMS, JOYCE
Address	3766 SUNSET KNOLLS DR
City-State-Zip:	THOUSAND OAKS CA 91362

Title	D
Name	RACINE, CHRISTINE
Address	3915 VILA BELLA DRIVE
City-State-Zip:	SEBRING FL 33872-2356

Title	D
Name	MCNELLEY, SUSAN
Address	9 DEER STALKER PATH
City-State-Zip:	MONTEREY CA 93940-6312

Title	D
Name	HARTMAN, MICHELE N
Address	407 ELLSWORTH DRIVE
City-State-Zip:	SILVER SPRINGS MD 20910-4223

Title	D
Name	ELVIN-STALTARI, LISABETH
Address	4010 EAST FOURTH STREET
City-State-Zip:	TUCSON AZ 85711

Title	DP
Name	TOUPIN, DAVID
Address	256 PARK STREET KINGSTON
City-State-Zip:	CANADA ON K7L1K-6

Title	VP
Name	MONTPELLIER, BRIAN
Address	4110 WEST 15TH AVE WEST
City-State-Zip:	VANCOUVER BC V6R3A-5

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: CHRISTINE A. RACINE**DIRECTOR****02/08/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date