

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

DOCUMENT# N23000013464

**Entity Name:** OUR LADY OF GUADALUPE CATHOLIC PARISH IN DORAL, INC.

**Current Principal Place of Business:**

11691 NW 25TH STREET  
DORAL, FL 33172

**Current Mailing Address:**

11691 NW 25TH STREET  
DORAL, FL 33172 US

**FEI Number:** 65-1132261

**Certificate of Status Desired:** No

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

FITZGERALD, J. PATRICK  
110 MERRICK WAY, SUITE 3-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 P/D  
Name MAGO, ISRAEL REV.  
Address 11691 NW 25TH STREET  
City-State-Zip: DORAL FL 33172

Title VP/D  
Name DELGADO, ENRIQUE MOST REV  
Address 9401 BISCAYNE BLVD  
City-State-Zip: MIAMI SHORES FL 33138

Title S/D  
Name ZIELONKA, DARIUSZ J MSGR.  
Address 9401 BISCAYNE BOULEVARD  
City-State-Zip: MIAMI SHORES FL 33138

Title D  
Name WENSKI, THOMAS G MOST REV  
Address 9401 BISCAYNE BOULEVARD  
City-State-Zip: MIAMI SHORES FL 33138

Title D  
Name WORLEY, ELIZABETH SISTER  
Address 9401 BISCAYNE BOULEVARD  
City-State-Zip: MIAMI SHORES FL 33138

*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:** SISTER ELIZABETH WORLEY

**DIRECTOR**

**04/14/2024**

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

\_\_\_\_\_  
Date