

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

DOCUMENT# N23000013730

**Entity Name:** ST. MICHAEL THE ARCHANGEL CATHOLIC PARISH IN MIAMI, INC.

**FILED**  
**Apr 27, 2024**  
**Secretary of State**  
**7585155437CC**

**Current Principal Place of Business:**

2987 WEST FLAGLER STREET  
MIAMI, FL 33135

**Current Mailing Address:**

2987 WEST FLAGLER STREET  
MIAMI, FL 33135 US

**FEI Number:** 59-0683269

**Certificate of Status Desired:** No

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

FITZGERALD, J. PATRICK ESQ  
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 ANTONIO GONZALEZ, ELVIS REV.  
Address 2987 WEST FLAGLER STREET  
City-State-Zip: MIAMI FL 33135

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

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

Title D  
Name WENSKI, THOMAS G MOST REVEREND  
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**

**04/27/2024**

Electronic Signature of Signing Officer/Director Detail

Date