

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24228

Entity Name: SHRINE OF FATIMA AND SAINT CAJETAN, INC.

Current Principal Place of Business:

10360 ATLANTA AVE.
BROOKSVILLE, FL 34614

Current Mailing Address:

10360 ATLANTA AVE.
BROOKSVILLE, FL 34614 US

FEI Number: 59-2865136

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VANNI, VINCENT
2615 ALLENWOOD STREET
BROOKSVILLE, FL 34601 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: VINCENT VANNI

01/31/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN, PRESIDENT
Name BOURQUE, JOHN LIONEL
Address 15 S MASTERS DR.
City-State-Zip: HOMOSASSA FL 34446

Title VICE CHAIRMAN
Name HELLER, JAMES
Address 10270 BRENTLAWN STREET
City-State-Zip: SPRING HILL FL 34608

Title TREASURER
Name MANCONI, MAUREEN KATE
Address 7201 TIMBER COURT
City-State-Zip: TAMPA FL 33625-3247

Title SECRETARY
Name MORGILLO, PATRICIA
Address 5125 KEYSVILLE AVENUE
City-State-Zip: SPRING HILL FL 34608

Title CORESPONDING SECRETARY
Name CARNIVAL-WASILEWSKI, KAREN
Address 22 POPPY COURT
City-State-Zip: HOMOSASSA FL 34446

Title TRUSTEE
Name WASILEWSKI, LEO
Address 22 POPPY COURT
City-State-Zip: HOMOSASSA FL 34446

Title TRUSTEE
Name BUCHANAN, PAM DONNA
Address 15 S MASTERS DRIVE
City-State-Zip: HOMOSASSA FL 34446

Title TRUSTEE
Name HURDEL, REINHARDT
Address 14360 CORONADO DRIVE
City-State-Zip: SPRING HILL FL 34609

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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: MAUREEN MANCONI

TREASURER

01/31/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PASTOR
Name NDREJAJ, MARK
Address 176 ALEATHA DRIVE
City-State-Zip: DAYTONA BEACH FL 32114