### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600003019

Entity Name: ASSOCIATION OF ST. LAWRENCE-COMUNITA CENACOLO

AMERICA INC.

## **Current Principal Place of Business:**

1050 TALLEYRAND AVE JACKSONVILLE, FL 32206

## **Current Mailing Address:**

1050 TALLEYRAND AVE JACKSONVILLE, FL 32206 US

FEI Number: 59-3426484 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

POWERS, NANCY M 1050 TALLEYRAND AVE JACKSONVILLE, FL 32206 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

**FILED** Jan 21, 2015

**Secretary of State** 

CC3355817814

#### Officer/Director Detail:

Title Title D

Name RITCHIE, MITCHELL S Name LOMBANA ARAGNO, JOYCE M

Address 5615 SAN JUAN AVE #312 Address 1050 TALLEYRAND AVE. City-State-Zip: JACKSONVILLE FL 32210 City-State-Zip: JACKSONVILLE FL 32206

Title Title Т

Name POWERS, NANCY M Name ARAGNO, ALBINO

Address 1050 TALLEYRAND AVE Address 1050 TALLEYRAND AVE. City-State-Zip: JACKSONVILLE FL 32206 JACKSONVILLE FL 32206 City-State-Zip:

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: NANCY M. POWERS

**TREASURER** 

01/21/2015