Entity Name: ASSOCIATION OF ST. LAWRENCE-COMUNITA CENACOLO AMERICA INC.	
Current Principal Place of Business:	

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

9485 REGENCY SQUARE BLVD. STE 110 JACKSONVILLE, FL 32225

DOCUMENT# N9600003019

Current Mailing Address:

9485 REGENCY SQUARE BLVD. STE 110 JACKSONVILLE, FL 32225 US

FEI Number: 59-3426484

Name and Address of Current Registered Agent:

POWERS, NANCY M 9485 REGENCY SQUARE BLVD. STE 110 JACKSONVILLE, FL 32225 US

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	Р	Title	D		
Name	RITCHIE, MITCHELL S	Name	LOMBANA ARAGNO, JOYCE M		
Address	5615 SAN JUAN AVE #312	Address	9485 REGENCY SQUARE BLVD		
City-State-Zip:	JACKSONVILLE FL 32210		STE 110		
		City-State-Zip:	JACKSONVILLE FL 32225		
Title	Т	Title	D		
Name	POWERS. NANCY M		D		
Name	FOWERS, NANOT M	Name	ARAGNO, ALBINO		
Address	9485 REGENCY SQUARE BLVD STE 110	A daha a a			
		Address	9485 REGENCY SQUARE BLVD STE 110		
City-State-Zip:	JACKSONVILLE FL 32225				
		City-State-Zip:	JACKSONVILLE FL 32225		

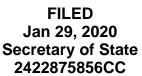
I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this 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

01/29/2020

Electronic Signature of Signing Officer/Director Detail



Date

Date