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Apr 25 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 754039 (6)

1. Corporation Name

KNIGHTS OF THE ALTAR INTERNATIONAL, INC.

Principal Place of Business

1512 DAWN HEIGHTS DRIVE
LAKELAND FL 33801

Mailing Address

P.O. BOX 5476
LAKELAND FL 33807-5476



3. Date Incorporated or Qualified
09/04/1980

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number
36-2754078

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HUSSEY, MRS. GERALD
601 IMPERIAL BOULEVARD
SUITE 155
LAKELAND FL 33803

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PTD
STREET ADDRESS DESILVESTRO, JOSEPH D
CITY-ST-ZIP 480 ILLINOIS STREET
MARSEILLES IL

TITLE ☐ DELETE

NAME SD
STREET ADDRESS HUSSEY, MRS. GERALD
CITY-ST-ZIP 601 IMPERIAL BLVD, #155
LAKELAND FL

TITLE ☐ DELETE

NAME D
STREET ADDRESS GAGLIANO, ANTHONY
CITY-ST-ZIP 2808 LAKEVIEW DRIVE
FERN PARK FL

TITLE ☒ DELETE

NAME ~~CHRISTENSON, RICHARD~~
STREET ADDRESS ~~319 E RIDGE ROAD, SUITE B-~~
CITY-ST-ZIP ~~GRIFFITH IN 40319~~

TITLE ☐ DELETE

NAME D
STREET ADDRESS BODOLAY, JOHN, S
CITY-ST-ZIP 6598 SWEETBRIAR LANE
LAKELAND FL

TITLE ☐ DELETE

NAME SR. BARBARA DANIELS, MSC
STREET ADDRESS 2811 MOYERS LN., PROVINCE CENTER
CITY-ST-ZIP READING PA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

D
JOSEPH N. DESILVESTRO
520 S. GIBSON ROAD
LAKELAND, FL 33807-5476

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Joseph D. Desilvestro* JOSEPH D. DESILVESTRO 4-15-97 815-433-5979

CR2E037 (9/96)