

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90301 050 ****61.25

DOCUMENT # N03000010551

1. Entity Name
CONFRATERNITY OF OUR LADY QUEEN OF PEACE
HOUSE OF PRAYER PALM BEACH COUNTY, FL INC.

Principal Place of Business
2745 OMEGA PLACE
NORTH PALM BEACH, FL 33408

Mailing Address
P.O. BOX 530215
LAKE PK, FL 33403

50042301



04062005 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2442973

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SEELINGER, JEAN M
2745 OMEGA PLACE
NORTH PALM BEACH, FL 33408

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Jean M. Seelinger
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

April 18, 2005
DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T President SEELINGER, JEAN 2745 OMEGA PL N PALM BCH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Lonnie Fox 536 NE 20th Ave. Boynton Beach, FL 33435-2393
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Trini Halfpap 10199 Daphne Ave. Palm Beach Gardens, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Rudolph Sass 2401 Beach Court #203 Singer Island, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jean M. Seelinger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 18, 2005
Date

561-623-1328
Daytime Phone #