

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003133

FILED  
Apr 27, 2006  
Secretary of State

**Entity Name:** THE SOVEREIGN ORDER OF ST. JOHN OF JERUSALEM KNIGHTS HOSPITALLER, COMMANDERY OF NICARAGUA, INC.

**Current Principal Place of Business:**

C/O THE COLONNADE, SUITE 550  
2333 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

133 ROSEWOOD CIRCLE  
JUPITER, FL 33458 US

**New Mailing Address:**

FEI Number: 20-0976460

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KELLY, ANDREAS M  
C/O THE COLONNADE, SUITE 550  
2333 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CARSON, DOROTHY  
Address: 17 DUKE STREET  
City-St-Zip: LAKE WORTH, FL 33460

Title: D ( ) Delete  
Name: PIERSANTI, JOYCE  
Address: 255 EVERNIA STREET, #1205  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Delete  
Name: ROSINSKY, CLAUDE  
Address: 255 EVERNIA STREET, #1205  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Delete  
Name: CHAMORRO, CARTURO  
Address: 7180 SW 136 STREET  
City-St-Zip: MIAMI, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/D (X) Change ( ) Addition  
Name: ROSINSKY, CLAUDE D  
Address: 200 EL BRILLO WAY  
City-St-Zip: PALM BEACH, FL 33480

Title: V/D (X) Change ( ) Addition  
Name: SOLORSANO, SILVIO A  
Address: SOVIPE KM5  
City-St-Zip: CARRETERA NORTE, NI

Title: S/D (X) Change ( ) Addition  
Name: PORTA, ZENOBIA  
Address: 13008 SW 88TH TERRACE NORTH  
City-St-Zip: MIAMI, FL 33186

Title: T/D (X) Change ( ) Addition  
Name: CHAMORRO, ARTURO  
Address: 7180 SW 136 STREET  
City-St-Zip: MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CLAUDE ROSINSKY

P/D

04/27/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date