

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011830

FILED
Apr 11, 2012
Secretary of State

Entity Name: GLADES COMMUNITY ORGANIZATION, INC.

Current Principal Place of Business:

ST. PHILIP CATHOLIC CHURCH
366 S. MAIN ST
BELLE GLADE, FL 33430

New Principal Place of Business:

GLADES COMMUNITY ORGANIZATION, INC.
366 S. MAIN ST
BELLE GLADE, FL 33430

Current Mailing Address:

ST. PHILIP CATHOLIC CHURCH
366 S. MAIN ST
BELLE GLADE, FL 33430

New Mailing Address:

GLADES COMMUNITY ORGANIZATION, INC.
366 S. MAIN ST
BELLE GLADE, FL 33430

FEI Number: 27-2166641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELVARD, QUESNEL J FR.
ST. PHILIP CATHOLIC CHURCH
366 S. MAIN ST
BELLE GLADE, FL 33430 US

Name and Address of New Registered Agent:

DELVARD, QUESNEL J FR.
GLADES COMMUNITY ORGANIZATION, INC.
366 S. MAIN ST
BELLE GLADE, FL 33430 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:

04/11/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: DELVARD, QUESNEL J FR
Address: 366 S. MAIN STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: T
Name: MCCARTHY, DENNIS
Address: 366 S. MAIN STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: S
Name: VAN BROCKLIN, GLORIA
Address: 2693 BARKLEY DR EAST
City-St-Zip: GREENACRES, FL 33415

Title: D
Name: ALVAREZ, GILBERTO
Address: 400 NE 2ND ST
City-St-Zip: BELLEGLADE, FL 33430

Title: D
Name: BERRY, ESTHER E DR.
Address: 210 SW 12 AVE
City-St-Zip: SOUTH BAY, FL 33493

Title: D
Name: GUILLAUME, SONIA
Address: 1333 MARTIN LUTHER KING BLVD
City-St-Zip: BELLE GLADE, FL 33430

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: FR. J. QUESNEL DELVARD

P

04/11/2012

Electronic Signature of Signing Officer or Director

Date