

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717717

**Entity Name:** DIOCESE OF SOUTHWEST FLORIDA INCORPORATED

**Current Principal Place of Business:**

8005 25TH STREET EAST  
PARRISH, FL 34219-9405

**Current Mailing Address:**

8005 25TH STREET EAST  
PARRISH, FL 34219-9405 US

**FEI Number:** 59-1282026

**Certificate of Status Desired:** No

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

VICKERS, ANNE MCFO  
8005 25TH STREET EAST  
PARRISH, FL 34219-9405 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name MCCOOK, CARLA  
Address 8005 25TH STREET EAST  
City-State-Zip: PARRISH FL 34219-9405

Title TREASURER, SECRETARY  
Name VICKERS, ANNE MCFO  
Address 8005 25TH STREET EAST  
City-State-Zip: PARRISH FL 34219-9405

Title CHANCELLOR  
Name TRIPP, THEODORE JR.  
Address 8005 25TH STREET EAST  
City-State-Zip: PARRISH FL 34219-9405

Title PRESIDENT  
Name SMITH, DABNEY TBISHOP  
Address 8005 25TH STREET EAST  
City-State-Zip: PARRISH FL 34219-9405

*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:** DABNEY SMITH

**PRESIDENT**

**02/11/2021**

Electronic Signature of Signing Officer/Director Detail

Date