

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 751076

**Entity Name:** THE SOUTHEAST REGIONAL OFFICE FOR HISPANIC  
MINISTRY, INC.

**Current Principal Place of Business:**

7700 S.W. 56 STREET  
MIAMI, FL 33155

**Current Mailing Address:**

7700 S.W. 56 STREET  
MIAMI, FL 33155 US

**FEI Number:** 59-1891177

**Certificate of Status Desired:** No

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

FITZGERALD, J. PATRICK ESQ.  
110 MERRICK WAY  
SUITE 3-B  
CORAL GABLES, FL 33134 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	SD	Title	VD
Name	CAPO, RAFAEL REV.	Name	KURTZ, JOSEPH RE
Address	7700 SW 56TH STREET	Address	212 EAST COLLEGE ST
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	LOUISVILLE KY 40203
Title	PD	Title	TD
Name	WENSKI, THOMAS GREV.	Name	RODI, THOMAS JMOST RE
Address	9401 BISCAYNE BOULEVARD	Address	400 GOVERNMENT ST
City-State-Zip:	MIAMI SHORES FL 33138	City-State-Zip:	MOBILE AL 36633

*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:** REV. RAFAEL CAPO, SCH.P.

01/23/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date