

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004697

Entity Name: SANCTA FAMILIA ACADEMY, INC.**Current Principal Place of Business:**2401 N. HARBOR CITY BLVD.
MELBOURNE, FL 32935**Current Mailing Address:**763 TEAK DR.
MELBOURNE, FL 32935 US**FEI Number:** 59-3727498**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALF, LINDA J
1904 ABINGTON DRIVE
MELBOURNE, FL 32901-4202 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	TREASURER, DIRECTOR
Name	PASTORIUS, RORY M.
Address	4472 ROGERS PLACE
City-State-Zip:	MELBOURNE FL 32904-3344

Title	DIRECTOR
Name	MURO, CHRISTOPHER V.
Address	2030 REDWOOD CIRCLE NE
City-State-Zip:	PALM BAY FL 32905-4024

Title	PRESIDENT, DIRECTOR
Name	HEDGECK, MARY R.
Address	2151 GRAND TETON BOULEVARD
City-State-Zip:	MELBOURNE FL 32935-3368

Title	DIRECTOR
Name	GAMBRELL, ELIZABETH ASHLEY
Address	1607 BAKER STREET
City-State-Zip:	PALM BAY FL 32907-2376

Title	SECRETARY, DIRECTOR
Name	ALF, LINDA JANE
Address	1904 ABINGTON DRIVE
City-State-Zip:	MELBOURNE FL 32901-4202

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: RORY M. PASTORIUS**TREASURER****03/25/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date