

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000007499

**FILED**  
**Feb 26, 2014**  
**Secretary of State**  
**CC6813055242**

**Entity Name:** CATHOLIC CHARITIES HOUSING, DIOCESE OF VENICE, INC.

**Current Principal Place of Business:**

1000 PINEBROOK ROAD  
VENICE, FL 34285

**Current Mailing Address:**

1000 PINEBROOK ROAD  
VENICE, FL 34285

**FEI Number:** 20-0487215

**Certificate of Status Desired:** Yes

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

DIVITO, JOSEPH A  
4514 CENTRAL AVENUE  
ST. PETERSBURG, FL 33711 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 D  
Name SMERYK, VOLODYMYR DR.  
Address 1000 PINEBROOK ROAD  
City-State-Zip: VENICE FL 34292

Title CD  
Name ROUTSIS-ARROYO, PETER  
Address 1000 PINEBROOK ROAD  
City-State-Zip: VENICE FL 34285

Title VPD  
Name BUSTER, CATHY SR.  
Address 420 BEACH ROAD  
City-State-Zip: SARASOTA FL 34242

Title SECRETARY  
Name SWEENEY, JIM  
Address 4616 MACKINAW AVENUE  
City-State-Zip: NORTH FORT MYERS FL 33903

Title D  
Name ROMILLO, ANA  
Address 2120 LUCKY STREET  
City-State-Zip: PORT CHARLOTTE FL 33988

Title D  
Name TYLER, PAT  
Address 2202 CASEY KEY ROAD  
City-State-Zip: NOKOMIS FL 34275

Title PRESIDENT  
Name ARAGONA, SHARON B  
Address 1000 PINEBROOK ROAD  
City-State-Zip: VENICE FL 34285

*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:** PETER ROUTSIS-ARROYO

**CHAIR**

**02/26/2014**

Electronic Signature of Signing Officer/Director Detail

Date