

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001178

Entity Name: HOLY CROSS MANOR II, INC.**Current Principal Place of Business:**540 26TH STREET WEST
PALMETTO, FL 34221**Current Mailing Address:**540 26TH STREET WEST
PALMETTO, FL 34221 US**FEI Number:** 26-4262900**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DIOCESE OF VENICE IN FLORIDA, INC.
1000 PINEBROOK RD
VENICE, FL 34285 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:** PETER MCPARTLAND

03/07/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name EVANOFSKI, REVEREND BERNARD
Address 540 26TH STREET WEST
City-State-Zip: PALMETTO FL 34221

Title VP
Name THOMPSON, DAVE "JOHN"
Address 540 26TH STREET WEST
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name PARISIAN, MARTHA
Address 540 26TH STREET WEST
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name YOUNG, MARSHA
Address 540 26TH STREET WEST
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name LABAR, JACK
Address 540 26TH STREET WEST
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name MCPARTLAND, PETER
Address 540 26TH STREET WEST
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name SMERYK, DR. VOLODYMYR
Address 540 26TH STREET WEST
City-State-Zip: PALMETTO FL 34221

Title SECRETARY/TREASURER
Name FRANCO, ANDREA
Address 540 26TH STREET WEST
City-State-Zip: PALMETTO FL 34221

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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: REVEREND BERNARD EVANOFSKI

PRESIDENT

03/07/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GAIA, JANE
Address 510 26TH STREET W
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name GLORIA, EDUARDO
Address 510 26TH STREET W
City-State-Zip: PALMETTO FL 34221