

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004176

Entity Name: VISAYAN & FRIENDS ASSOCIATION INC.**Current Principal Place of Business:**68 11TH ST
SHALIMAR, FL 32579**Current Mailing Address:**68 11TH ST
SHALIMAR, FL 32579**FEI Number: NOT APPLICABLE****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**MORGAN, SENAIDA L
68 11TH ST
SHALIMAR, FL 32579 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 PRESIDENT
Name JULIE, CUCUZZELLA L
Address 1074 BLVD DE LA PARISIENNE
City-State-Zip: MARY ESTHER FL 32548

Title VP
Name BERNARDO, LLEVARDO
Address 63 OAK LANE
City-State-Zip: SALIMAR FL 32579

Title TREASURER
Name JOY, ALEDIA
Address 735 E HOLLYWOOD BLVD
City-State-Zip: MARY ESTHER FL 32548

Title ASST. TREASURER
Name NURIDDIN, DOLORES
Address 1884 TINE COURT
City-State-Zip: FORT WALTON FL 32547

Title ASST. SECRETARY
Name JOCELYN, VISINTIN
Address 441 BRIDGEWATER CT
City-State-Zip: MARY ESTHER FL 32548

Title OTHER, SPEAKER OF THE HOUSE
Name ROGADO, RAMON
Address 7637 WOODMONT ST
City-State-Zip: NAVARRE FL 32566

Title SECRETARY
Name DERISMA, SAUL
Address 68 11TH
City-State-Zip: SHALIMAR FL 32569

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: CUCUZZELLA JULIE**PRESIDENT****02/12/2021**

Electronic Signature of Signing Officer/Director Detail

Date