

2015 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	MORGAN, SENAIDA L
Address	68 11TH ST
City-State-Zip:	SHALIMAR FL 32579

Title	CEO
Name	CUCUZZELLA, JULIE L
Address	1074 BLVD . DE LA PARISIENNE
City-State-Zip:	MARY ESTHER FL 32569

Title	SEC
Name	WOOLEGE, NATALIA
Address	105 BUTLER CIR
City-State-Zip:	CRESTVIEW FL 32536

Title	TREASURER
Name	LUZ, KEENE
Address	11 68TH ST
City-State-Zip:	SHALIMAR FL 32579

Title	ASST. TREASURER
Name	KELLY, ROSENDA
Address	1821 RATTAN PALM BLVD
City-State-Zip:	NICEVILLE FL 32579

Title	DANC
Name	BUSICK, ALECIA
Address	618 MAINE AVE
City-State-Zip:	PANAMA CITY FL 32401

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: JULIE CUCUZZELLA

CEO

01/19/2015

Electronic Signature of Signing Officer/Director Detail_____
Date