

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004954

Entity Name: THE SETON ACADEMY, INC.**Current Principal Place of Business:**5973 SW 42ND TERR.
MIAMI, FL 33155**Current Mailing Address:**5973 SW 42ND TERR.
MIAMI, FL 33155**FEI Number:** 27-2629971**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GUTIERREZ, NICOLAS JJR.
1528 PALERMO AVENUE
CORAL GABLES, FL 33134 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	PD
Name	RANGEL-DIAZ, LILLIAM
Address	5973 SW 42ND TERR.
City-State-Zip:	MIAMI FL 33155

Title	D
Name	MENDIVE, SILVIA
Address	5973 SW 42ND TERR.
City-State-Zip:	MIAMI FL 33155

Title	D
Name	GALLEGO, ANA
Address	5973 SW 42ND TERR.
City-State-Zip:	MIAMI FL 33155

Title	D
Name	ACOSTA, SOFIA
Address	5973 SW 42ND TERR.
City-State-Zip:	MIAMI FL 33155

Title	D
Name	OLSEN-BARBARA, ROSA M
Address	5973 SW 42ND TERR.
City-State-Zip:	MIAMI FL 33155

Title	D
Name	ECHARTE, CAROLINA A
Address	5973 SW 42ND TERR.
City-State-Zip:	MIAMI FL 33155

Title	DIRECTOR
Name	DIAZ, ADOLFO
Address	5973 SW 42ND TERR.
City-State-Zip:	MIAMI FL 33155

Title	DIRECTOR
Name	HUESCA, FR. OMAR
Address	5973 SW 42ND TERR.
City-State-Zip:	MIAMI FL 33155

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: ANA M. GALLEGO**DIRECTOR****04/26/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date