## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000009466

Entity Name: ORDER OF ST. JOHN OF JERUSALEM, KNIGHTS

HOSPITALLER OF FLORIDA INC.

**Current Principal Place of Business:** 

CARE OF: ISABELLE K. PAUL 1771 SABAL PALM DR BOCA RATON, FL 33432

## **Current Mailing Address:**

CARE OF: ISABELLE K. PAUL 1771 SABAL PALM DR BOCA RATON, FL 33432 US

FEI Number: 27-3684638 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PAUL, ISABELLE K 1771 SABAL PALM DRIVE BOCA RATON, FL 33432 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: ISABELLE K PAUL 03/14/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT (COMMANDER), AND Title 1ST VICE PRESIDENT (1ST VICE

TRUSTEE COMMANDER), AND TRUSTEE

Name PAUL, ISABELLE K Name ROBERTSON, JON DR.

Address 1771 SABAL PALM DRIVE Address 5124 COLUMBO COURT

City-State-Zip: BOCA RATON FL 33432 City-State-Zip: DELRAY BEACH FL 33484

Title SECRETARY, AND TRUSTEE Title TREASURER, AND TRUSTEE

Name STANLEY, KIRSTEN Name ZIEMAN, CATHERINE

Address 499 THATCH PALM DRIVE Address 7212 HORIZON DRIVE

#6-B City-State-Zip: BOCA RATON FL 33432

City-State-Zip: WEST PALM BEACH FL 33412

Title TRUSTEE AND HOSPITALLER Title TRUSTEE

Name BALLERANO, JAMES A JR. Name CSAR, MARY
Address 21083 SWEETWATER LANE, NORTH

Address 801 S. W. 16TH STREET

City-State-Zip: BOCA RATON FL 33428

City-State-Zip: BOCA RATON FL 33428

City-State-Zip: BOCA RATON FL 33428 City-State-Zip: BOCA RATON FL 33486

Title TRUSTEE Title TRUSTEE

Name RICKARD, NANCY PULTE Name ZOLEY, DONNA

Address 1239 COCOANUT ROAD Address 1515 FAN PALM RD.

City-State-Zip: BOCA RATON FL 33432 City-State-Zip: BOCA RATON FL 33432

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: CATHERINE ZIEMAN TREASURER 03/14/2021

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 14, 2021

**Secretary of State** 

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