

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003904

Entity Name: MOTHER FRANCES DE SALES AUXILIARY TO THE HOMELESS, INC.**FILED**
Feb 25, 2019
Secretary of State
7834375490CC**Current Principal Place of Business:**6581 DOMINICA DRIVE
UNIT 101
NAPLES, FL 34113**Current Mailing Address:**6581 DOMINICA DRIVE
UNIT 101
NAPLES, FL 34113 US**FEI Number: 45-2259250****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FOXHOVEN, REBECCA
6581 DOMINICA DRIVE
UNIT 101
NAPLES, FL 34113 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 MRS.
Name BARTON, RHODORA D
Address 7 THE TRILLIUM
City-State-Zip: PITTSBURGH PA 15238

Title MRS, SECRETARY
Name WOODWARD, LAURIE
Address 2029 TEAGARDEN LANE
City-State-Zip: NAPLES FL 34110

Title MRS.
Name FERRAO, TINA M
Address 800 SPYGLASS LANE
City-State-Zip: NAPLES FL 34102

Title MRS.
Name FOXHOVEN, REBECCA D
Address 6581 DOMINICA DRIVE
UNIT 101
City-State-Zip: NAPLES FL 34113

Title MRS.
Name MINKER, MAUREEN
Address 1525 BONITA LANE
City-State-Zip: NAPLES FL 34102

Title MRS.
Name DONAHUE, RHODORA
Address 100 BAY ROAD
City-State-Zip: NAPLES FL 34102

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: REBECCA FOXHOVEN**PRESIDENT****02/25/2019**

Electronic Signature of Signing Officer/Director Detail

Date