2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12959

Entity Name: ST VINCENT DE PAUL SOCIETY CENTRAL COUNCIL OF ST

PETERSBURG DIOCESE, INC

Current Principal Place of Business:

4556 S. MANHATTAN AVE., STE A TAMPA, FL 33611

Current Mailing Address:

4556 S. MANHATTAN AVE., STE A TAMPA, FL 33611 US

FEI Number: 59-2617093 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ROPERT, MARVIN 4216 S MANHATTAN AVE #214 TAMPA, FL 33611 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

FILED Feb 02, 2024

Secretary of State

7613024833CC

Officer/Director Detail:

Title CEO Title PD

Name ROPERT, MARVIN A Name NANCY, JONES Address **4216 S MANHATTAN 214** Address 4703 SAN RAFAEL City-State-Zip: TAMPA FL 33611 City-State-Zip: TAMPA FL 33629

Title **DIRECTOR** Title DIRECTOR SMITH, ROGER Name SWEENEY, ED Name Address 347 QUANE AVE Address 6915 AMARILLO ST City-State-Zip: PORT RICHEY FL 34668 City-State-Zip: SPRING HILL FL 34609

Title **TREASURER** Title **PRESIDENT** Name MILLER, KENT Name AHERN, PATRICK

Address 4224NBS SAN LUIS ST 2006 NUGGET DT Address

City-State-Zip: **TAMPA FL 33629** City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR Title SPIRITUAL ADVISOR

Name BEAUCHEMIN, STELLA Name GYASI, GEORGE

Address 3015 CHRISTOPHER WATCH LN Address 14605 RANNOCH MOOR PLACE

City-State-Zip: RUSKIN FL 33570 WIMAUMA FL 33598 City-State-Zip:

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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.

02/02/2024 SIGNATURE: MARVIN ROPERT **CEO**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name CONDON, BILL

Address 1640 BRIGHTWATERS BLVD NE

City-State-Zip: ST PETERSBURG FL 33704

Title DIRECTOR

Name JONES, NANCY

Address 4703 SAN RAFAEL ST

City-State-Zip: TAMPA FL 33629

Title DIRECTOR

Name PURCELL, CAROL

Address 1021 CHILLUM CT

City-State-Zip: CLEARWATER FL 33755