

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000005959

**FILED**  
**Apr 26, 2019**  
**Secretary of State**  
**1898089962CC**

**Entity Name:** OUR LADY OF LIGHT PARISH IN FORT MYERS, INC.

**Current Principal Place of Business:**

19680 CYPRESS VIEW DR  
FT MYERS, FL 33967

**Current Mailing Address:**

1000 PINEBROOK ROAD  
VENICE, FL 34285 US

**FEI Number: 65-0196037**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DIVITO, JOSEPH A ESQ  
4514 CENTRAL AVE  
ST PETERSBURG, FL 33711 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 T, PRESIDENT, TREASURER  
Name MCGUIGAN O.S.F.S., HUGH J REV  
Address 1000 PINEBROOK ROAD  
City-State-Zip: VENICE FL 34285

Title T  
Name MCNAMARA V.G., MSGR STEPHEN E REV  
Address 1000 PINEBROOK RD  
City-State-Zip: VENICE FL 34285

Title T  
Name SMERYK, VOLODYMYR DR  
Address 1000 PINEBROOK RD  
City-State-Zip: VENICE FL 34285

Title VP  
Name ERCOLINO, JOSEPH  
Address 1000 PINEBROOK ROAD  
City-State-Zip: VENICE FL 34285

Title SECRETARY  
Name WHELAN, HILARY M  
Address 1000 PINEBROOK ROAD  
City-State-Zip: VENICE FL 34285

*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: DR. VOLODYMYR SMERYK**

**TRUSTEE**

**04/26/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date