

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000012809

Entity Name: DIOCESE OF SAINT RAPHAEL ARCHANGEL, CORP.**Current Principal Place of Business:**356 PIKE ROAD
ELLIJAY, GA 30536**Current Mailing Address:**356 PIKE ROAD
ELLIJAY, GA 30536 US**FEI Number:** 85-3898551**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RUFFOLO, MARK
6354 LA COSTA DRIVE
UNIT B
BOCA RATON, FL 33431 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:** MARK RUFFOLO

04/10/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name FUENTES, RAFAEL BISHOP
Address 22378 SW 57TH CIRCLE
City-State-Zip: BOCA RATON FL 33428

Title DEACON
Name RUFFOLO, MARK DEACON
Address 6354 LA COSTA DRIVE
UNIT B
City-State-Zip: BOCA RATON FL 33428

Title SECRETARY/AUTHORIZED MEMBER
Name FUENTES, CARMEN M
Address 356 PIKE ROAD
City-State-Zip: ELLIJAY GA 30536

Title TRS
Name SHEEN, CONSUELO
Address 7147 PIGEON KEY WAY
City-State-Zip: LAKE WORTH FL 33467

Title OFICER
Name FUENTES, SANDRA
Address 6354 LA COSTA DRIVE
UNIT B
City-State-Zip: BOCA RATON FL 33431

Title OFR
Name ROSA, MAXIKMO H
Address 1857 WALDORF STREET
City-State-Zip: ROYAL PALM BEACH FL 33411

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: RAFAEL FUENTES

PRESIDENT

04/10/2023

Electronic Signature of Signing Officer/Director Detail

Date