

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000013395

Entity Name: CATHOLIC CHARITIES - LAS VILLAS, INC.**Current Principal Place of Business:**6363 9TH AVENUE NORTH
ST PETERSBURG, FL 33710**Current Mailing Address:**6363 9TH AVENUE NORTH
ST PETERSBURG, FL 33710 US**FEI Number:** 85-4357966**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VASTI, PETER J
200 CENTRAL AVENUE
SUITE 1600
ST. PETERSBURG, FL 33701 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	SECRETARY
Name	ROGERS, MARGARET
Address	1213 16TH ST N
City-State-Zip:	ST PETERSBURG FL 33705

Title	TREASURER
Name	WAYNE, JAMES
Address	1213 16TH ST N
City-State-Zip:	ST PETERSBURG FL 33705

Title	VP
Name	CHIAVACCI, ROBERT
Address	1213 16TH STREET NORTH
City-State-Zip:	ST PETERSBERG FL 33705

Title	PRESIDENT
Name	MORRIS, ROBERT MSGR
Address	6363 9TH AVENUE NORTH
City-State-Zip:	ST PETERSBURG FL 33710

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: JAMES J WAYNE

TREASURER

04/11/2022

Electronic Signature of Signing Officer/Director Detail_____
Date