2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22776

Entity Name: KARDECIAN SPIRITIST FEDERATION OF FLORIDA INC.

FILED Jan 13, 2015 Secretary of State CC5320483155

Current Principal Place of Business:

965 SO, SHORE DR MIAMI BEACH, FL 33141

Current Mailing Address:

965 SO. SHORE DR

MIAMI BEACH. FL 33141 US

FEI Number: 65-0034375 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NETTO, MARCELO C 965 SO. SHORE DR MIAMI BEACH, FL 33141 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 P. PRESIDENT Title

SIMOES, SUZANA Name Name NETTO, MARCELO C 307 NE 99 ST 965 SO. SHORE DRIVE Address Address City-State-Zip: MIAMI BEACH FL 33141 MIAMI FL 33138 City-State-Zip:

Title Т Title S

Name ALVES, ALEXANDRE R KRETCHETOFF, STELA V Name Address 680 BROOKSHIRE DR Address 4731 CHEVY PLACE DAVENPORT FL 33837 City-State-Zip: ORLANDO FL 32811 City-State-Zip:

Title VICE SECRETARY Title VICE TREASURER

Name RODRIGUEZ, MARGARITA BARRY, ANGELICA Name

Address 7710 SW 62 AVE 240 WST END DRIVE Address

APT 223

City-State-Zip: PUNTA GORDA FL 33950

Title COMMUNICATIONS DIRECTOR **EVENTS DIRECTOR** Title Name MELLADO, CLAUDIA G

Name AYRES, TEREZA Address 1302 NE 191 ST

Address 1302 NE 191 ST

APT 123

NO. MIAMI BEACH FL 33179 City-State-Zip: NO. MIAMI BEACH FL 33179 City-State-Zip:

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MIAMI FL 33143

City-State-Zip:

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: MARCELO NETTO Electronic Signature of Signing Officer/Director Detail 01/13/2015

Date

Officer/Director Detail Continued:

Title AUDITOR DIRECTOR
Name GURGEL, FERNANDA

Address 8304 PLANTATION LAKES CIRCLE

City-State-Zip: SANFORD FL 32771