

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23000013675

**Entity Name:** STS. PETER AND PAUL CATHOLIC PARISH IN MIAMI, INC.

**Current Principal Place of Business:**

900 SW 26TH ROAD  
MIAMI, FL 33129

**Current Mailing Address:**

900 SW 26TH ROAD  
MIAMI, FL 33129 US

**FEI Number:** 59-6001769

**Certificate of Status Desired:** No

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

FITZGERALD, PATRICK J  
110 MERRICK WAY, SUITE 3-B  
CORAL GABLES, FL 33134 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/D  
Name FLORES, LUIS A REV.  
Address 900 SW 26TH ROAD  
City-State-Zip: MIAMI FL 33129

Title D/V/P  
Name DELGADO, ENRIQUE MOST REV.  
Address 9401 BISCAYNE BOULEVARD  
City-State-Zip: MIAMI SHORES FL 33138

Title D/S  
Name ZIELONKA, J.C.D, DARIUSZ J MSGR  
Address 9401 BISCAYNE BOULEVARD  
City-State-Zip: MIAMI SHORES FL 33138

Title D  
Name WENSKI, THOMAS G. MOST REVEREND  
Address 9401 BISCAYNE BOULEVARD  
City-State-Zip: MIAMI SHORES FL 33138

Title D  
Name WORLEY, ELIZABETH SISTER  
Address 9401 BISCAYNE BOULEVARD  
City-State-Zip: MIAMI SHORES FL 33138

*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:** SISTER ELIZABETH WORLEY

**DIRECTOR**

**04/16/2024**

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

\_\_\_\_\_  
Date