

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N28072

**Entity Name:** DIOCESAN COUNCIL OF ORLANDO, SOCIETY OF ST. VINCENT DE PAUL, INC.

**FILED  
Jul 02, 2020  
Secretary of State  
7613928671CC**

**Current Principal Place of Business:**

770 S. ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703

**Current Mailing Address:**

770 S. ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703 US

**FEI Number: 59-2948683**

**Certificate of Status Desired: No**

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

TRYLKO, TRACE  
770 S. ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703 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            PRES  
Name            GILLETT, BRUCE  
Address        770 S. ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

Title            TREA  
Name            BUCZKOWSKI, TERRY  
Address        770 S ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

Title            EXDI  
Name            TRYLKO, TRACE  
Address        770 S. ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

Title            BUS MGR  
Name            BONNIE D KENNEDY  
Address        770 S. ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

Title            SECRETARY  
Name            WILHELM, JUDY  
Address        770 S. ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

*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: BONNIE KENNEDY**

**BUSINESS MANAGER**

**07/02/2020**

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

\_\_\_\_\_  
Date