

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N43722

**Entity Name:** OLD CATHOLIC CHURCH OF NEW UTRECHT,INC.

**Current Principal Place of Business:**

1224 13TH AVENUE NORTH  
LAKE WORTH, FL 33460

**Current Mailing Address:**

1224 13TH AVENUE NORTH  
LAKE WORTH, FL 33460 US

**FEI Number: 59-3127960**

**Certificate of Status Desired: Yes**

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

M.REV. RICHARD SEBASTIAN RICCARDI  
1224 13TH AVENUE NORTH  
LAKE WORTH, FL 33460 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 PD  
Name RICCARDI, M.REV. RICHARD  
Address 1224 13TH AVENUE NORTH  
City-State-Zip: LAKE WORTH FL 33460

Title TREASURER  
Name THOMAS, REV. FERDINAND  
Address 2410 TWICKINGHAM CT  
City-State-Zip: CLERMONT FL 34711-6989

Title D  
Name JANSEN, M.REV EDWARD VAUGHN  
VICAR GENERAL  
Address 2351 ADAM DAVID WAY  
City-State-Zip: MARRIOTTSVILLE, MD MD 21104

Title D  
Name PANT, REV. MICHAEL E CHANCELLOR  
Address 1825 SW SUCCESS STREET  
City-State-Zip: PORT SAINT LUCIE FL 34963

Title D  
Name GAFFNEY, REV. DR. PATRICIA  
Address 2351 ADAM DAVID WAY  
City-State-Zip: MARRIOTTSVILLE MD 21104

*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: M. REV. RICHARD SEBASTIAN RICCARDI**

**PD**

**02/10/2016**

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

\_\_\_\_\_  
Date