

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49150

Entity Name: BATAAN-CORREGIDOR MEMORIAL FOUNDATION, INC.**Current Principal Place of Business:**5150 APOLLO AVENUE
ST CLOUD, FL 34773**Current Mailing Address:**5150 APOLLO AVENUE
ST CLOUD, FL 34773 US**FEI Number:** 59-3128025**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAMOS, ESTRELLITA V
3183 ARROWHEAD LANE
KISSIMMEE, FL 34746 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 CHAIRMAN
Name PUNZALAN, RIZALINO
Address 5150 APOLLO AVENUE
City-State-Zip: ST CLOUD FL 34773

Title TREASURER
Name PUNZALAN, ROSEMARIE L
Address 5150 APOLLO AVENUE
City-State-Zip: ST CLOUD FL 32765

Title F/D
Name HERRING, RICHARD
Address 1716 TROFEZ STREET
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name PASQUAL, ENRIQUE
Address 5150 APOLLO AVENUE
City-State-Zip: ST CLOUD FL 34773

Title EXECUTIVE SECRETARY
Name RAMOS, ESTRELLITA V
Address 3183 ARROWHEAD LANE
City-State-Zip: KISSIMMEE FL 34746

Title VC
Name AMADIO, HERMIE
Address 2946 CONNER LANE
City-State-Zip: KISSIMMEE FL 34741

Title F/D
Name DEMESA, MENANDRO M
Address 428 BALL COURT
City-State-Zip: KISSIMMEE FL 34759

Title DIRECTOR
Name GONZALES, PETER
Address 3507 FOREST RIDGE ANE
City-State-Zip: KISSIMMEE FL 34741

Continues on page 2

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: ROSEMARIE L PUNZALAN**TREASURER****04/22/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PUNZALAN, CYNTHIA
Address 5150 APOLLO AVENUE
City-State-Zip: ST CLOUD FL 34773

Title PR/D
Name PINO, MARK
Address 5150 APOLLO AVENUE
City-State-Zip: ST CLOUD FL 34773

Title DIRECTOR
Name MAHONEY, PHILIP
Address 5150 APOLLO AVENUE
City-State-Zip: ST CLOUD FL 34773