2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2019
Secretary of State
7434606918CC

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
5150 APOLLO AVENUE
ST CLOUD, FL 34773 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	5150 APPOLLO AVENUE
City-State-Zip:	ST CLOUD FL 34773

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

Title	EXECUTIVE SECRETARY
Name	RAMOS, ESTRELLITA V
Address	5150 APOLLO AVENUE
City-State-Zip:	ST CLOUD FL 34773

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

Title	F/D
Name	DEMESA, MENANDRO M
Address	5150 APOLLO AVENUE
City-State-Zip:	ST CLOUD FL 34773

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: RIZALINO PUNZALAN TREASURER 02/27/2019

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