2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2024
Secretary of State
7803659186CC

DOCUMENT# N96000003019

Entity Name: ASSOCIATION OF ST. LAWRENCE-COMUNITA CENACOLO AMERICA INC.

Current Principal Place of Business:

9485 REGENCY SQUARE BLVD. STE 110
JACKSONVILLE, FL 32225

Current Mailing Address:

9485 REGENCY SQUARE BLVD. STE 110
JACKSONVILLE, FL 32225 US

FEI Number: 59-3426484

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POWERS, NANCY M
9485 REGENCY SQUARE BLVD. STE 110
JACKSONVILLE, FL 32225 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	D	Title	PRESIDENT/TREASURER
Name	LOMBANA ARAGNO, JOYCE M	Name	POWERS, NANCY M
Address	9485 REGENCY SQUARE BLVD STE 110	Address	9485 REGENCY SQUARE BLVD STE 110
City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVILLE FL 32225
Title	VP	Title	SECRETARY
Name	ARAGNO, ALBINO	Name	CORRIGAN, ELAINE
Address	9485 REGENCY SQUARE BLVD STE 110	Address	9485 REGENCY SQUARE BLVD STE 110
City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVILLE FL 32225
Title	DIRECTOR		
Name	CORRIGAN, SEAN		
Address	9485 REGENCY SQUARE BLVD. SUITE 110		
City-State-Zip:	JACKSONVILLE FL 32225		

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: NANCY M POWERS PRESIDENT 02/05/2024

Electronic Signature of Signing Officer/Director Detail — Date