

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000003921

Entity Name: MOTHER OF DIVINE GRACE, INC.**Current Principal Place of Business:**407 BRYANT CIRCLE, STE C
OJAI, CA 93023**Current Mailing Address:**407 BRYANT CIRCLE, STE C
OJAI, CA 93023 US**FEI Number:** 20-8607181**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HUMPHREY, MARY
344 SHETLAND DR
ST.JOHNS, FL 32259 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:** MARY HUMPHREY

02/20/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name BERQUIST, LAURA
Address 407 BRYANT CIRCLE, STE C
City-State-Zip: OJAI CA 93023

Title DIRECTOR
Name PETER , DELUCA
Address 407 BRYANT CIRCLE, STE C
City-State-Zip: OJAI CA 93023

Title D
Name SCHUBERG, BETH
Address 407 BRYANT CIRCLE, STE C
City-State-Zip: OJAI CA 93023

Title D
Name DOME, FR. THOMAS
Address 407 BRYANT CIRCLE, STE C
City-State-Zip: OJAI CA 93023

Title D
Name WALDSTEIN, FR. EDMUND
Address 407 BRYANT CIRCLE, STE C
STE C
City-State-Zip: OJAI CA 93023

Title PRESIDENT
Name LAZENBY, PAUL
Address 407 BRYANT CIRCLE, STE C
City-State-Zip: OJAI CA 93023

Title DIRECTOR
Name JUSTIN , ALVAREZ
Address 407 BRYANT CIRLE
SUITE C
City-State-Zip: OJAI CA 93023

Title DIRECTOR
Name MARK, MASTROIENI
Address 407 BRYANT CIRCLE
SUITE C
City-State-Zip: OJAI CA 93023

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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: BERNARD MICHAEL**TREASURER**

02/20/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WALSHE, FR. SEBASTIAN
Address 407 BRYANT CIRCLE
 STE C
City-State-Zip: OJAI CA 93023

Title SECRETARY
Name MCALISTER, MARILYN
Address 407 BRYANT CIRCLE, STE C
City-State-Zip: OJAI CA 93023

Title TREASURER
Name BERNARD, MICHAEL
Address 407 BRYANT CIRCLE
 SUITE C
City-State-Zip: OJAI CA 93023