

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744831

FILED  
Jun 15, 2011  
Secretary of State

**Entity Name:** FUNDACION MISIONERA REDENCION, INC.

**Current Principal Place of Business:**

15611 NW 45 AVENUE  
CAROL CITY, FL 33056

**New Principal Place of Business:**

**Current Mailing Address:**

3930 NW 175TH ST.  
CAROL CITY, FL 33055

**New Mailing Address:**

FEI Number: 59-2821510

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

POLANCO, LUGINIO (REV)  
121 N.W. 4TH. AVE.  
DANIA, FL., FL 33004 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: POLANCO, LUGINIO (REV)  
Address: 3930 N.W. 175TH ST.  
City-St-Zip: CAROL CITY, FL 33056

Title: VP  
Name: RODRIGUEZ, LUCIANO  
Address: 9 ARABIA AVE.  
City-St-Zip: OPA-LOCKA, FL

Title: SD  
Name: POLANCO, EVA  
Address: 3930 N.W. 175TH ST.  
City-St-Zip: CAROL CITY, FL 33056

Title: TD  
Name: RODRIGUEZ, EVA  
Address: 9 ARABIA AVE.  
City-St-Zip: OPA-LOCKA, FL

Title: D  
Name: ALAGASTINO, HERMINIA  
Address: 4040 N.E.  
City-St-Zip: POMPANO BEACH, FL

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: REV. LUGINIO POLANCO

PD

06/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date