

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747375

FILED
Apr 22, 2006
Secretary of State

Entity Name: MIZPA CHRISTIAN UNIVERSITY, INC.

Current Principal Place of Business:

4940 HOFFNER AVENUE
ORLANDO, FL 32812 US

New Principal Place of Business:

Current Mailing Address:

4940 HOFFNER AVENUE
ORLANDO, FL 32812 US

New Mailing Address:

FEI Number: 65-0206069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DIAZ, JOSE A
3321 BON AIR DR.
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

ROSA, NOEMI
3862 BENTFORD CT
ORLANDO, FL 32817 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: NOEMI ROSA

04/22/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PEREZ, JOSE J
Address: 538 MARICOPA DR.
City-St-Zip: KISSIMMEE, FL 34758 US

Title: D () Delete
Name: MILLAN, JESUS
Address: 303 N. DOVER RD.
City-St-Zip: AVON PARK, FL 33825 US

Title: D () Delete
Name: FONTANEZ, MISAEL
Address: 1530 KEARIN LN.
City-St-Zip: ORLANDO, FL 32825 US

Title: D () Delete
Name: HUAMAN, ELIZABETH
Address: 3850 BENTFORD CT.
City-St-Zip: ORLANDO, FL 32817 US

Title: D () Delete
Name: ROSA, NOEMI
Address: 3862 BENTFORD COURT
City-St-Zip: ORLANDO, FL 32817 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FLORES, BENICIA
Address: 2005 11TH STREET
City-St-Zip: ST. CLOUD, FL 34769 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: DIAZ, JOSE A
Address: 2300 LILLY PAD LN
City-St-Zip: KISSIMMEE, FL 34743 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSE A. DIAZ

P

04/22/2006

Electronic Signature of Signing Officer or Director

Date