

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000009121

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** ASOCIACION LATINOAMERICANA DE ESCRITORES CRISTIANOS, INC

**Current Principal Place of Business:**

5465 NW 36TH STREET  
MIAMIS SPRINGS, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

5465 NW 36TH STREET  
MIAMIS SPRINGS, FL 33166

**New Mailing Address:**

**FEI Number:** 27-3617144

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ORELLANA, EUGENIO  
5465 NW 36TH STREET  
MIAMI SPRINGS, FL 33166 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: P  
Name: ORELLANA, EUGENIO  
Address: 5465 NW 36TH STREET  
City-St-Zip: MIAMISPRINGS, FL 33166

Title: VP  
Name: ARIZA, MARIO  
Address: 115 CALABRIA AVENUE # 14  
City-St-Zip: CORAL GABLES, FL 33134

Title: S  
Name: ORELLANA, CIRE  
Address: 10801 SW 109TH COURT # D-416  
City-St-Zip: MIAMI, FL 33176

Title: T  
Name: GONZALEZ, JOSE  
Address: 13924 SW 151TH AVENUE  
City-St-Zip: MIAMI, FL 33196

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: EUGENIO I. ORELLANA

MR

04/11/2012

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

\_\_\_\_\_  
Date