STEPANIAN, G 402 W MAIN ST IMMOKALEE, F									
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	: GAYANE STEPANIAN		02/03/201	17					
	Electronic Signature of Registered Agent		Date						
Officer/Director Detail :									
Title	PD	Title	TD						
Name	KROME, MEDORA	Name	PRICE, STEVE						
Address	P.O. BOX 900596	Address	PO BOX 2262						
City-State-Zip:	HOMESTEAD FL 33090	City-State-Zip:	IMMOKALEE FL 34143						
Title	SD	Title	VD						
Name	PRINGLE, RICHARD	Name	STUART, MICHAEL						
Address	2125 FIRST STREET, SUITE #200	Address	P.O. BOX 948153						
City-State-Zip:	FORT MYERS FL 33902	City-State-Zip:	MAITLAND FL 32794						
Title	VD	Title	VD						
Name	BAYER, MICHAEL T	Name	WISHNATZKI, GARY						
Address	PO BOX 1765	Address	PO BOX 1839						
City-State-Zip:	W. PALM BEACH FL 33406	City-State-Zip:	PLANT CITY FL 33563						
Title	VD	Title	D						
Name	FERRARI, WILLIAM	Name	ROBLES DE MELENDEZ, WILMA						
Address	300 BEACH DRIVE NE UNIT 1902	Address	17831 SW 4TH CT.						
		City-State-Zip:	PEMBROKE PINES FL 33029						
City-State-Zip:	ST. PETERSBURG FL 33701	Continues							
		Continues on page 2							

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709687

Entity Name: REDLANDS CHRISTIAN MIGRANT ASSOCIATION, INC.

Current Principal Place of Business:

402 W MAIN STREET IMMOLAKEE, FL 34142-3933

Current Mailing Address:

402 W MAIN STREET IMMOLAKEE, FL 34142-3933 US

FEI Number: 59-1221966

Name and Address of Current Registered Agent:

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: GAYANE STEPANIAN

CEO

02/03/2017 Date

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

FILED Feb 03, 2017 Secretary of State CC3218875480

Certificate of Status Desired: Yes

Title	D
Name	LUIS, NELSON
Address	16127 CARDEN DRIVE
City-State-Zip:	ODESSA FL 33556
Title	D
Name	PEREZ, JOAQUIN
Address	251 BOCA CIEGO ROAD
City-State-Zip:	MASCOTTE FL 34753
Title	D
Name	ENGLISH, KATHERINE R
Address	1833 HENDRY STREET
City-State-Zip:	FORT MYERS FL 33902
Title	D
Name	HINSON, AL J
Address	903 S. PINELAND AVENUE
City-State-Zip:	AVON PARK FL 33825
Title	DIRECTOR
Name	ALLISON, CHUCK
Address	3330 LAKE SHORE DRIVE
City-State-Zip:	ORLANDO FL 32803
Title	OTHER
Name	JIMENEZ, CELIA
Address	123 N. 4TH STREET
City-State-Zip:	IMMOKALEE FL 34142
Title	OTHER
Name	ESTEVEZ, MARCELA
Address	2205 HARVARD CT.
City-State-Zip:	RIVERVIEW FL 33578
Title	DIRECTOR
Name	JAIMES, MINERVA
Address	577 SW 5TH STREET
City-State-Zip:	FLORIDA CITY FL 33034
Title	OTHER
Name	SANTIAGO, JESSICA
Address	3103 SAN JOSE MISSION DRIVE
City-State-Zip:	DOVER FL 33527
Title	OTHER
Name	GONZALEZ, IRMA
Address	123 N. 4TH STREET
City-State-Zip:	IMMOKALEE FL 34142
Title	OTHER
Name	BURKE NIEVES, NATALIE

Title	D
Name	MILES-ADAMS, LINDA
Address	6383 MACLAURIN DRIVE
City-State-Zip:	TAMPA FL 33647
Title	D
Name	SALUSTRO, LARRY
Address	1759 CORAL WAY NORTH
City-State-Zip:	VERO BEACH FL 32963
Title	D
Name	WEISINGER, JAIME
Address	315 E. NEW MARKET ROAD
City-State-Zip:	IMMOKALEE FL 34142
Title	OTHER
Name	MURRILLO, ARACELI
Address	123 N. 4TH STREET
City-State-Zip:	IMMOKALEE FL 34142
Title	DIRECTOR
Name	HIGHTOWER, SANDRA
Address	6780 LAKE CLARK DRIVE
City-State-Zip:	LAKELAND FL 33813
Title	OTHER
Name	JUAREZ, MARIA
Address	2509 NETTLOW LANE
City-State-Zip:	WIMAUMA FL 33598
Title	DIRECTOR
Name	KENDRICK, GLORIA
Address	6780 LAKE CLARK DRIVE
City-State-Zip:	LAKELAND FL 33813
Title	OTHER
Name	JOSE, FELIX
Address	3102 SAMMONDS ROAD APT #82
City-State-Zip:	PLANT CITY FL 33563
Title	OTHER
Name	JOSE, SEGISMUNDO
Address	14710 SWEET CHARLE CIRCLE
City-State-Zip:	BALM FL 33598
Title	OTHER
Name	PERALTA, YUDID
Address	19280 SW 378TH STREET
City-State-Zip:	FLORIDA CITY FL 33034
Title	OTHER
Name	MCCLENDON, FELECIA
Address	157 SOUTH COUNTRY ROAD 21

Address	551 W. COWBOY WAY	City-State-Zip:	HAWTHORNE FL 32148
City-State-Zip:	LABELLE FL 33935	Title	OTHER
Title	OTHER	Name	WILLIAMS, BRADLEY G
Name	FUENTES, GLORIA A	Address	2590 COUNTY ROAD 760A
Address	509 HOPE CIRCLE	City-State-Zip:	NOCATEE FL 34268
City-State-Zip:	IMMOKALEE FL 34142	Title	OTHER
Title	CEO	Name	GARCIA, ISABEL
Name	STEPANIAN, GAYANE	Address	402 W. MAIN STREET
Address	402 W. MAIN STREET	City-State-Zip:	IMMOKALEE FL 34142
City-State-Zip:	IMMOKALEE FL 34142		