#### 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 709687** 

Entity Name: REDLANDS CHRISTIAN MIGRANT ASSOCIATION, INC.

**FILED** Feb 17, 2022 **Secretary of State** 9356659806CC

# **Current Principal Place of Business:**

402 W MAIN STREET

IMMOKALEE, FL 34142-3933

## **Current Mailing Address:**

**402 W MAIN STREET** 

IMMOKALEE, FL 34142-3933 US

FEI Number: 59-1221966 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

GARCIA, ISABEL 402 W MAIN STREET IMMOKALEE, FL 34142-3933 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: ISABEL GARCIA 02/17/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PΠ Title SECRETARY, DIRECTOR

Name KROME, MEDORA Name PRINGLE, RICHARD

2125 FIRST STREET, SUITE #500 Address P.O. BOX 900596 Address

FORT MYERS FL 33901 City-State-Zip: City-State-Zip: HOMESTEAD FL 33090

Title D Title VP, DIRECTOR

Name ROBLES DE MELENDEZ, WILMA BAYER, MICHAEL T Name

Address 3301 COLLEGE AVENUE Address PO BOX 1765

City-State-Zip: FORT LAUDERDALE FL 33314 City-State-Zip: W. PALM BEACH FL 33402

Title VP. DIRECTOR Title VP, DIRECTOR

Name PEREZ, JOAQUIN Name MILES-ADAMS, LINDA

Address 251 BOCA CIEGO ROAD Address 6383 MACLAURIN DRIVE

City-State-Zip: MASCOTTE FL 34753 TAMPA FL 33647 City-State-Zip:

Title VP. DIRECTOR Title DIRECTOR, TREASURER

Name WEISINGER, JAIME SALUSTRO, LARRY Name

Address 315 E. NEW MARKET ROAD Address 235 OAK HAMMOCK CT., SW

City-State-Zip: IMMOKALEE FL 34142 City-State-Zip: VERO BEACH FL 32962

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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.

02/17/2022 EXECUTIVE DIRECTOR SIGNATURE: ISABEL GARCIA

Electronic Signature of Signing Officer/Director Detail

Date

### Officer/Director Detail Continued:

Title DIRECTOR

NameHINSON, AL JNameHIGHTOWER, SANDRAAddress903 S. PINELAND AVENUEAddress6780 LAKE CIRCLE DRIVECity-State-Zip:AVON PARK FL 33825City-State-Zip:LAKELAND FL 33813

Title

Title

Title

Title

VP, DIRECTOR

DIRECTOR

**DIRECTOR** 

**PARENT** 

Title DIRECTOR

NameKENDRICK, GLORIANameGARCIA, ISABELAddress1537 SW HARLEM CIRCLEAddress402 W. MAIN STREETCity-State-Zip:ARCADIA FL 34266City-State-Zip:IMMOKALEE FL 34142

Title DIRECTOR, VP

Name

City-State-Zip:

Name MAINSTER ROLLASON, BARBARA Name VALLEJO, ANSBERTO

Address 14940 OLD OLGA ROAD Address 10066 CREEK BLUFF DRIVE
City-State-Zip: FORT MYERS FL 33905 City-State-Zip: RIVERVIEW FL 33578

Title DIRECTOR

TIGHE, SONIA

MULBERRY FL 33860

Name GAFFNEY, DONNA Name DE LA CRUZ, EMIG

Address 2091 OCEANVIEW DRIVE Address 1402 W. KNIGHTS GRIFFIN RD.

City-State-Zip: TIERRA VERDE FL 33715 City-State-Zip: PLANT CITY FL 33565

Title DIRECTOR Title PARENT

Name MARTINEZ, ERIK

Name HIGGINS, DANI MARTINEZ, ERIK

Address 2344 PARKLAND DRIVE Address 541 EAST INTERLAKE BLVD.

City-State-Zip: LAKELAND FL 33811 City-State-Zip: LAKE PLACID FL 33852

Title DIRECTOR Title DIRECTOR

Name KIRK, STEVEN

Address 16124 BRECON PALMS PLACE Address 16445 OLD CUTLER ROAD

City-State-Zip: TAMPA FL 33647 City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR Title DIRECTOR

Name BISERRA, SUSANNE A

Address 138 WOODCREST COURT

Name DOWLING, AEDAN J

Address 6839 BAY HILL DRIVE

City-State-Zip: BRADENTON FL 34202

Title DIRECTOR Title PARENT

Name NEGRINI, MIRTA Name JUAREZ, LETICIA
Address 1460 ROBBIA AVENUE Address 38010 SW 195TH AVE

City-State-Zip: CORAL GABLES FL 33146

Title PARENT

Name VENTURA, RUBIDELIA

Name GARCIA, SERVANDO

Address 4441 ACADEMY DRIVE

Address 14710 SWEET CHARLIE CIRCLE City-State-Zip: MULBERRY FL 33860

City-State-Zip: BALM FL 33598

Title PARENT ... ... ... ... ... ...

Name MORALES, REBECCA
Name ACOSTA, VIRIDIANA
Address 551 WEST COWBOY WAY

Address 551 WEST COWBOY WAY

City-State-Zip: LABELLE FL 33935

Title PARENT

 Title
 PARENT
 Name
 GARCIA, ZURISADAI

 Name
 CAAL, HEIDY
 Address
 2306 HOPE CIRCLE

Address 16101 HALF MILE ROAD, BLDG D-1 City-State-Zip: SEBRING FL 33870

City-State-Zip: DELRAY BEACH FL 33446