

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747375

Entity Name: MIZPA CHRISTIAN UNIVERSITY, INC.**Current Principal Place of Business:**4940 HOFFNER AVENUE
ORLANDO, FL 32812**Current Mailing Address:**4940 HOFFNER AVENUE
ORLANDO, FL 32812 US**FEI Number:** 38-3776280**Certificate of Status Desired:** Yes**Name and Address of Current 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	SOTO, LUIS JR.
Address	3372 TUMBLING RIVER DRIVE
City-State-Zip:	CLERMONT FL 34711

Title	D
Name	RAMIREZ, SANTOS C.
Address	1943 TIPTREE CIR.
City-State-Zip:	ORLANDO FL 32837

Title	P
Name	DEL VALLE, ZORAIDA
Address	9403 WALDSTRASEE CT.
City-State-Zip:	ORLANDO FL 32824

Title	D
Name	RUIZ, SKARLING
Address	1752 DELAWARE ST. N. W.
City-State-Zip:	ORLANDO FL 32907

Title	D
Name	PERDOMO, ALEXANDRA
Address	14919 PRAIRE ROSE CT..
City-State-Zip:	ORLANDO FL 32824

Title	D
Name	DIAZ, JOSE A.
Address	2300 LILY PAD LN.
City-State-Zip:	KISSIMMEE FL 34743

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: JOSE A. DIAZ

D

04/21/2016

Electronic Signature of Signing Officer/Director Detail_____
Date