

2018 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:**P.O. BOX. 721977
ORLANDO, FL 32872 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	RUIZ, SKARLING
Address	1752 DELAWARE ST. N. W.
City-State-Zip:	ORLANDO FL 32907

Title	TREASURER
Name	RODRIGUEZ, TOMAS
Address	1810 SHERWOOD HILL DR.
City-State-Zip:	LAKELAND FL 33810-3052

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

Title	DIRECTOR
Name	MARRERO, ANGEL L
Address	7905 ALHAMBRA BLVD.
City-State-Zip:	MIRAMAR FL 33023

Title	PRESIDENT OF THE UNIVERSITY
Name	COLON, FELIX
Address	6302 DOE CIRCLE
City-State-Zip:	LAKELAND FL 33809

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: DR. FELIX COLON**PRESIDENT****01/09/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date