

2024 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:**ALBIZU, ANNERIS DR.
1906 STILLWOOD WAY
ST. CLOUD,, FL 34771 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:** ANNERIS ALBIZU

02/07/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name VAZQUEZ, KAREN
Address 8227 CAMPBELL CROSSING CIRCLE
City-State-Zip: LAKELAND FL 33810

Title MEMBER
Name RODRIGUEZ, NORMA I
Address 3803 ROLLINGSFORD CIRCLE
City-State-Zip: LAKELAND FL 33810

Title TREASURER
Name LESLIE, COLON
Address 14103 MIDSWEET LANE
APT. #306
City-State-Zip: WINTER GARDEN FL 34787

Title PRESIDENT
Name ALBIZU, ANNERIS DR.
Address 1906 STILLWOOD WAY
City-State-Zip: ST. CLOUD FL 34771

Title MEMBER
Name YOLANDA, ISLAND
Address 1211 STONEHAM DRIVE
City-State-Zip: GROVELAND FL 34736

Title MEMBER
Name JOSE , RUIZ VICTOR JR.
Address 6774 ARNOLDSON STREET
City-State-Zip: ORLANDO FL 32827

Title SECRETARY
Name FLECHA, IRIS M
Address 16049 OLD ASH LOOP
City-State-Zip: ORLANDO FL 32828

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: ALBIZU, ANNERIS, DR.

PRESIDENT

02/07/2024

Electronic Signature of Signing Officer/Director Detail

Date