

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000007106

**Entity Name:** CENTRO DE LA FAMILIA CRISTIANA DE POINCIANA, INC.

**Current Principal Place of Business:**

3250 PLEASANT HILL RD  
KISSIMMEE, FL 34746

**Current Mailing Address:**

3250 PLEASANT HILL RD  
KISSIMMEE, FL 34746

**FEI Number:** 20-1429017

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FIGUEROA, JAVIER  
3250 PLEASANT HILL RD  
KISSIMMEE, FL 34746 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 P  
Name FIGUEROA, JAVIER  
Address 3250 PLEASANT HILL RD  
City-State-Zip: KISSIMMEE FL 34746

Title S  
Name CRUZ, NELSON  
Address 4990 POOLSIDE DR  
City-State-Zip: ST CLOUD FL 34769

Title T  
Name CLAVELL, JORGE  
Address 3018 BONFIRE BEACH DR #104  
City-State-Zip: KISSIMMEE FL 34746

Title T  
Name FIGUEROA, ROSELIND  
Address 2718 MONTECRISTO LN  
City-State-Zip: KISSIMMEE FL 34758

*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:** JAVIER FIGUEROA

**PRESIDENT**

**04/02/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date