2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011173

Entity Name: CENTRAL CHRISTIAN UNIVERSITY, INC.

FILED Apr 29, 2024 **Secretary of State** 8624269427CC

Current Principal Place of Business:

5503 N HIAWASSEE RD ORLANDO, FL 32818

Current Mailing Address:

P.O. BOX 680710

ORLANDO. FL 32868-0710 US

FEI Number: 20-3760873 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AMESTY, JUAN CARLOS DR. 5503 N HIAWASSEE RD ORLANDO, FL 32818 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: JUAN CARLOS AMESTY 04/29/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title DIRECTOR

AMESTY, JUAN CARLOS Name Name AMESTY, DINORAHT 5503 N HIAWASSEE RD Address 5503 N HIAWASSEE RD Address City-State-Zip: ORLANDO FL 32818 ORLANDO FL 32818 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name ROSARIO, JESUS Name TORRES, SAMUEL

Address 5503 N HIAWASSEE RD Address 5503 N HIAWASSEE RD ORLANDO FL 32818

City-State-Zip: ORLANDO FL 32818 City-State-Zip:

Title DIRECTOR Title **DIRECTOR**

Name QUINTERO, LAURA Name OROPEZA, SARAH Address 5503 N HIAWASSEE RD Address 5503 N HIAWASSEE RD

City-State-Zip: ORLANDO FL 32818 City-State-Zip: ORLANDO FL 32818

Title DIRECTOR

RODRIGUEZ, EULOGIO Name 5503 N HIAWASSEE RD Address ORLANDO FL 32818 City-State-Zip:

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.

04/29/2024 SIGNATURE: JUAN CARLOS AMESTY **PRESIDENT**