

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000002769

**Entity Name:** MISSION COMPASSION INC**Current Principal Place of Business:**525 S. RONALD REAGAN BLV STE 113  
LONGWOOD, FL 32750**Current Mailing Address:**525 S. RONALD REAGAN BLV STE 113  
LONGWOOD, FL 32750 US**FEI Number:** 27-0320137**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GONZALEZ, IGNACIO  
525 S. RONALD REAGAN STE 113  
LONGWOOD, FL 32750 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 BOARD MEMBER

Name VELEZ, LINDA

Address 2878 PEWTER MIST CT

City-State-Zip: OVIEDO FL 32765

Title VP

Name ROMERO, MIRIAM

Address 1071 FRANCIS ST

City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title PRESIDENT

Name GONZALEZ, IGNACIO

Address 1071 FRANCIS ST.

City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title BOARD MEMBER

Name LOPEZ, CERLAINE

Address 302 CHEROKEE CT APT G

City-State-Zip: ALTAMONTE SPRING FL 32701

Title BOARD MEMBER

Name GONZALEZ, STEPHANIE

Address 1071 FRANCIS STREET

City-State-Zip: ALTAMONTE SPRING FL 32701

Title BOARD MEMBER

Name HARVEY, KERI LYN

Address 241 COLOMBO DR

City-State-Zip: CASELBERRY FL 32707

*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:** IGNACIO GONZALEZ**PRESIDENT****04/06/2023**

Electronic Signature of Signing Officer/Director Detail

Date