

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000009878

**Entity Name:** IGLESIA CRISTIANA UN NUEVO COMIENZO OCALA, INC.

**Current Principal Place of Business:**

55 PALM RD  
OCALA, FL 34472

**FILED**  
**Jun 08, 2020**  
**Secretary of State**  
**7127005668CC**

**Current Mailing Address:**

10221 SE 42ND TERRACE  
BELLEVIEW, FL 34420 US

**FEI Number: 94-3488750**

**Certificate of Status Desired: Yes**

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

BONILLA, OMAR SR.  
10221 SE 42ND TERRACE  
BELLEVIEW, FL 34420 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 PASTOR, PRESIDENT  
Name BONILLA, OMAR SR  
Address 10221 SE 42ND TERRACE  
City-State-Zip: BELLEVIEW FL 34420

Title VP, PASTOR  
Name LUGO, KAREN L MS  
Address 10221 SE 42ND TERRACE  
City-State-Zip: BELLEVIEW FL 34420

Title TREASURER  
Name ROJAS, LINDA Z  
Address 15585 SW 34 COURT RD  
City-State-Zip: OCALA FL 34473

Title DEACON  
Name PACHECO, ROBERTO SR.  
Address 5185 SE 39TH LOOP  
City-State-Zip: OCALA FL 34480

Title SECRETARY  
Name RIVERA, SYLKA  
Address 4630 SE 27 ST  
City-State-Zip: OCALA FL 34480

*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: OMAR BONILLA**

**PRESIDENT**

**06/08/2020**

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

\_\_\_\_\_  
Date