

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004058

Entity Name: COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC.**Current Principal Place of Business:**10050 SE US HWY 441
BELLEVIEW, FL 34420**Current Mailing Address:**P.O. BOX 1940
BELLEVIEW, FL 34420**FEI Number: 27-2558994****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**JIMENEZ, MANUEL D PASTOR
728 LAKE DIAMOND AVE
OCALA, FL 34472 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	MANUEL, JIMENEZ DPASTOR
Address	728 LAKE DIAMOND AVE
City-State-Zip:	OCALA FL 34472

Title	VP
Name	DEJIMENEZ, DELICIA LASSIST.
Address	728 LAKE DIAMOND AVE
City-State-Zip:	OCALA FL 34472

Title	T
Name	VALENTINO, STEPHEN
Address	12321 SE 97TH AVE
City-State-Zip:	BELLEVIEW FL 34420

Title	S
Name	FRET, IVONNE R
Address	8740 SE 64TH AVE
City-State-Zip:	OCALA FL 34472

Title	TR
Name	TORRES, IRAIDA
Address	4400 SE 79 STREET
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: MANUEL D JIMENEZ**PRESIDENT****02/01/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date