

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000005328

Entity Name: LA GRAN COMISION COMMUNITY CHURCH INC.**Current Principal Place of Business:**1150 E. HALLANDALE BEACH BLVD
SUITE D
HALLANDALE BEACH, FL 33009**Current Mailing Address:**1150 E HALLANDALE BEACH BLVD
SUITE D
HALLANDALE BEACH, FL 33009 US**FEI Number:** 47-3298168**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CST BUSINESS GROUP LLC
1150 HALLANDALE BEACH BLVD
SUITE D
HALLANDALE BEACH, FL 33009 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:** CARMEN S ROMERO-TEJEDA

06/29/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P, DIRECTOR
Name QUINTERO-LEVY, DAVID GREGORIO
Address 1150 E. HALLANDALE BEACH BLVD
SUITE D
City-State-Zip: HALLANDALE BEACH FL 33009

Title VP, DIRECTOR
Name ALMAO, DULCE MARIA PASTOR
Address 1150 E HALLANDALE BEACH BLVD
SUITE D
City-State-Zip: HALLANDALE BEACH FL 33009

Title TREASURER
Name ROMERO-TEJEDA, CARMEN SOFIA
Address 1150 E. HALLANDALE BEACH BLVD
SUITE D
City-State-Zip: HALLANDALE BEACH FL 33009

Title VP, DIRECTOR
Name REYES, JOSET - PASTOR
Address 880 ASYLUM AVE
City-State-Zip: HARTFORD CT 06105

Title ELDER
Name PERNALETE, FRANCY ROGELIA
Address 1150 E HALLANDALE BEACH BLVD
SUITE D
City-State-Zip: HALLANDALE BEACH FL 33009

Title ELDER
Name SILVA, YULIANA DEL CARMEN
Address 1150 E HALLANDALE BEACH BLVD
SUITE D
City-State-Zip: HALLANDALE BEACH FL 33009

Title ELDER
Name GONZALEZ, FRANKLIN JAVIER
Address 1150 E HALLANDALE BEACH BLVD
SUITE D
City-State-Zip: HALLANDALE BEACH FL 33009

Title SECRETARY
Name TROCHE, MARITZA
Address 347 ZION STREET
2ND FLOOR
City-State-Zip: HARTFORD CT 06106

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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: DAVID QUINTERO-LEVY

PRESIDENT

06/29/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	ELDER
Name	SILVA, AMANDA DEL CARMEN
Address	1150 E HALLANDALE BEACH BLVD SUITE D
City-State-Zip:	HALLANDALE BEACH FL 33009