

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 02, 2015
Secretary of State
CC9158452680

Entity Name: CENTRO DE REHABILITACION CRISTIANO NUEVO AMANECER INC.

Current Principal Place of Business:

5902 SEABOARD AVE.
JACKSONVILLE, FL 32244

Current Mailing Address:

5902 SEABOARD AVE.
JACKSONVILLE, FL 32244 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GARCIA-VASQUEZ, EMANUEL
1850 MANITOBA CT. N.
MIDDLEBURG,, FL 32068 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 VP
Name GARCIA-VASQUEZ, EMANUEL
Address 1850 MANITOBA CT. N.
City-State-Zip: MIDDLEBURG, FL 32068

Title PRES
Name GARCIA, ELIOT M
Address 1850 MANITOBA CT.N
City-State-Zip: MIDLEBURG FL 32068

Title PRES
Name GARCIA, IVIS A
Address 1850 MANITOBA CT.N
City-State-Zip: MIDDLEBURG FL 32068

Title SEC
Name TUA, TERESA
Address 2938 BENT BOW LANE
City-State-Zip: MIDDLEBURG FL 32068

Title TREASURER
Name TUA, NEDINARDO
Address 2938 BENT BOW LANE
City-State-Zip: MIDDLEBURG FL 32068

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: IVIS A. GARCIA

PRES

02/02/2015

Electronic Signature of Signing Officer/Director Detail

Date