

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004440

Entity Name: COMUNIDAD CRISTIANA CASA DEL ALFARERO, INC.**Current Principal Place of Business:**4618 W. IRLO BRONSON MEMORIAL HWY
KISSIMMEE, FL 34746**Current Mailing Address:**120 VERACRUZ AVE.
KISSIMMEE, FL 34743 US**FEI Number:** 46-2907837**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MARTINEZ, DANIEL
120 VERACRUZ AVE.
KISSIMMEE, FL 34743 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	MARTINEZ, DANIEL
Address	120 VERACRUZ AVE
City-State-Zip:	KISSIMMEE FL 34743

Title	VP
Name	MARTINEZ, ANA IRIS
Address	120 VERACRUZ AVE.
City-State-Zip:	KISSIMMEE FL 34743

Title	S
Name	PENA, VIANELA A
Address	2317 ANDREW VALLEY DR.
City-State-Zip:	KISSIMMEE FL 34758

Title	T
Name	ROSA, MARIA Z
Address	1110 WINDWAY CIR.
City-State-Zip:	KISSIMMEE FL 34744

Title	OFFICER
Name	GABRIEL, IXIA INET
Address	1930 W. MARTIN ST
City-State-Zip:	KISSIMMEE FL 34741

Title	OFFICER
Name	BRACEWELL, ANA SHEYLA
Address	400 MARTIGUES DR
City-State-Zip:	KISSIMMEE FL 34759

Title	OFFICER
Name	LOPEZ, NOILA
Address	4011 SUNNY DAY WAY
City-State-Zip:	KISSIMMEE FL 34744

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: ANA MARTINEZ

VP

01/19/2016

Electronic Signature of Signing Officer/Director Detail

Date