

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000006762

**Entity Name:** DUNAMIS INTERNATIONAL CHAPLAINS ASSOCIATION, INC.**Current Principal Place of Business:**8320 W STATE RD 84  
DAVIE, FL 33324**Current Mailing Address:**1120 SE 71 TERRACE  
NORTH LAUDERDALE , FL 33068 US**FEI Number: 90-1015352****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**COLLAZO, GUILLERMO  
1120 SW 71 TERRACE  
NORTH LAUDERDALE , FL 33068 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 PD  
Name COLLAZO, GUILLERMO DR.  
Address 8320 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title COO  
Name SIMON, ROSA L  
Address 8320 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title DIRECTOR, DAVIE FL  
Name GONZALEZ, JERRY DR.  
Address 8320 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title DIRECTOR, HOMESTEAD FL  
Name RIVERA, WILFREDO  
Address 8320 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title CEO  
Name HERNANDEZ, VIVIAN  
Address 8320 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title VP  
Name RAMOS, FRANCISCO  
Address 8320 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title DIRECTOR, MIAMI FL  
Name MORELL , RICHARD  
Address 8320 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title DIRECTOR, WINTER HAVEN FL  
Name RAMIREZ, DOEL  
Address 8320 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

**Continues on page 2**

*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: GUILLERMO COLLAZO****PRESIDENT****04/30/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title SECRETARY  
Name RAMIREZ, FANY  
Address 8320 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title DIRECTOR, PUERTO RICO  
Name HERNANDEZ COLON, MILDRED  
Address 1120 SE 71 TERRACE  
City-State-Zip: NORTH LAUDERDALE FL 33068

Title CEO  
Name WILDERS, TERANCE  
Address 1120 SE 71 TERRACE  
City-State-Zip: NORTH LAUDERDALE FL 33068

Title DIRECTOR, MICAR UNIVERSITY  
Name PEREZ, FELIX DR.  
Address 1120 SE 71 TERRACE  
City-State-Zip: NORTH LAUDERDALE FL 33068

Title DIRECTOR, UTICA NEW YORK  
Name SANTOS, RAUL REV  
Address 911 ARCADIA AVE  
City-State-Zip: UTICA NY 13502

Title OFFICER, EMERGENCY RESPONSE  
INSTRUCTOR  
Name ZELAYA, FREDY JR.  
Address 1120 SE 71 TERRACE  
City-State-Zip: NORTH LAUDERDALE FL 33068