

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000008945

Entity Name: CONFRATERNIDAD DE ESPOSAS DE PASTORES Y
MISIONERAS INC**Current Principal Place of Business:**12621 BALCOMBE RD
ORLANDO, FL 32837**Current Mailing Address:**12621 BALCOMBE RD
ORLANDO, FL 32837 US**FEI Number: 46-3647747****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**PERDOMO, ALEXANDRA MIS
12621 BALCOMBE RD
ORLANDO, FL 32837 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	PERDOMO, ALEXANDRA MIS
Address	12621 BALCOMBE RD
City-State-Zip:	ORLANDO FL 33837

Title	VOCAL
Name	COSME, AURA
Address	1013 E. COLUMBIA AVE.
City-State-Zip:	KISSIMMEE FL 34744

Title	TREASURER
Name	SANTIAGO, WANDA M
Address	8 PINE CT
City-State-Zip:	OCALA FL 34472

Title	SECRETARY
Name	SOTO, AGRIPINA MIS
Address	325 SAMUEL STREET
City-State-Zip:	DAVENPORT FL 33897

Title	VOCAL
Name	RIVERA, LINDA
Address	3262 BENFORD CIR
City-State-Zip:	ORLANDO FL

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: SOTO AGRIPINA MIS**SECRETARY****05/01/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date