

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000010880

Entity Name: PRIMERA IGLESIA CRISTIANA ADORAM, INC.**Current Principal Place of Business:**29010 S HIGHWAY 27
DUNDEE, FL 33838**Current Mailing Address:**107 RICHMAR AVE
HAINE CITY, FL US**FEI Number: 46-4801898****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**ORTIZ, CARLOS PASTOR
107 RICHMAR AVE
HAINE CITY, FL 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	ORTIZ, SHIRLEY M PASTOR 2
Address	107 RICHMAR AVE
City-State-Zip:	HAINE CITY FL 33844

Title	VP
Name	ORTIZ, CARLOS PASTOR
Address	107 RICHMAR AVE
City-State-Zip:	HAINE CITY FL 33844

Title	SECRETARY
Name	GONZALEZ, EDWIN J
Address	133 CLAY CUT CIRCLE
City-State-Zip:	HAINE CITY FL 33844

Title	ASST. SECRETARY
Name	BETANCOURT, BLEYSON
Address	3043 CLUB CIR
City-State-Zip:	LAKE SHORE FL 33854

Title	SECRETARY
Name	GONZALEZ, LAUREN
Address	133 CLAY CUT CIR
City-State-Zip:	HAINE CITY FL 33844

Title	TREASURER
Name	EDWIN, GONZALEZ O
Address	941 GLOUCESTER COURT
City-State-Zip:	KISSIMMEE FL 34758

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: REV. CARLOS ORTIZ**PASTOR****01/25/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date