

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000010880

**Entity Name:** PRIMERA IGLESIA CRISTIANA ADORAM, INC.**Current Principal Place of Business:**2010 HIGHWAY 27  
DUNDEE, FL 33838**Current Mailing Address:**107 RICHMAR AVE  
HAINE CITY, FL US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**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, CARLOS PASTOR
Address	107 RICHMAR AVE
City-State-Zip:	HAINE CITY FL 33844

Title	VP
Name	ORTIZ, SHIRLEY
Address	5873 WINDRIDGE DR
City-State-Zip:	WINTER HAVEN FL 33881

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

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

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 GLOUSCESTER COURT
City-State-Zip:	KISSIMME 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:** CARLOS ORTIZ**PRESIDENT****04/12/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date