

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

DOCUMENT# N13000011396

**Entity Name:** IGLESIA CRISTIANA ODRE NUEVO INC

**Current Principal Place of Business:**

3325 13TH STREET  
SAINT CLOUD, FL 34769

**Current Mailing Address:**

1951 VALLEY FORGE DRIVE  
SAINT CLOUD, FL 34769

**FEI Number: 46-4220991**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

RIVERA-FIGUEROA, ILEANA PASTOR  
1951 VALLEY FORGE DRIVE  
SAINT CLOUD, FL 34769 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 RIVERA-FIGUEROA, ILEANA PASTOR  
Address 1951 VALLEY FORGE DRIVE  
City-State-Zip: SAINT CLOUD FL 34769

Title VP  
Name RIVERA-CARDONA, WILLIAM  
Address 1951 VALLEY FORGE DRIVE  
City-State-Zip: SAINT CLOUD FL 34769

Title ELDER  
Name CRUZ BURGOS, NORMA PASTOR  
Address 10462 LAXTON STREET  
City-State-Zip: ORLANO FL 32824

Title TREASURER  
Name RODRIGUEZ, ARADANNY  
Address 930 COSTA MESA LN  
City-State-Zip: KISSIMMEE FL 34744

Title TREASURER  
Name LOPEZ, MIGUEL LEONARDO  
Address 930 COSTA MESA LN  
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: ILEANA RIVERA-FIGUEROA**

**PASTOR**

**03/15/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date