

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21275

**FILED**  
**Apr 02, 2013**  
**Secretary of State**  
**CC0397898664**

**Entity Name:** MISSION L'EGLISE DE JESUS CHRIST, INC.

**Current Principal Place of Business:**

MISSION CHURCH OF JESUS CHRIST, INC.  
1047 26TH STREET  
ORLANDO,, FL 32805

**Current Mailing Address:**

MISSION CHURCH OF JESUS CHRIST, INC.  
534 TULANE DRIVE  
ALTAMONTE SPRINGS,, FL 32714 US

**FEI Number:** 59-2820349

**Certificate of Status Desired:** No

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

NERCIUS, CINCYR  
534 TULANE DRIVE  
ALTAMONTE SPRINGS, FL 32714 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 CINCYR, NERCIUS  
Address 534 TULANE DRIVE  
City-State-Zip: ALTAMONTE SPRINGS, FL 32714

Title VPD  
Name SERAPHINE, LUC  
Address 1043 26TH STREET  
City-State-Zip: ORLANDO, FL 32805

Title SD  
Name LUCATE, MARIE  
Address 1344 43RD STREET  
City-State-Zip: ORLANDO FL 32839

Title TD  
Name VICTOR, LUCKNE  
Address 1043 26TH STREET  
City-State-Zip: ORLANDO FL 32805

Title D  
Name LOUIS, JACQUELIN  
Address 2924 HICKORY CREE DR  
City-State-Zip: ORLANDO FL 32818

*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:** MARIE R LUCATE

**SD**

**04/02/2013**

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

\_\_\_\_\_  
Date