

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000002870

**Entity Name:** PUNTO NORTE MINISTRIES INC

**Current Principal Place of Business:**

9090 E IRLO BRONSON HWY  
SAINT CLOUD, FL 34773

**Current Mailing Address:**

9090 E IRLO BRONSON HWY  
SAINT CLOUD, FL 34773 US

**FEI Number:** 88-2486264

**Certificate of Status Desired:** Yes

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

FAIL SAFE ACCOUNTING LLC  
20 S ROSE AVE  
SUITE 4  
KISSIMMEE, FL 34741 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 ED  
Name GORDON, HECTOR  
Address 9090 E IRLO BRONSON HWY  
City-State-Zip: SAINT CLOUD FL 34773

Title D  
Name ORTIZ, DAVID  
Address 9090 E IRLO BRONSON HWY  
City-State-Zip: SAINT CLOUD FL 34773

Title D  
Name NELLY, RUTH  
Address 9090 E IRLO BRONSON HWY  
City-State-Zip: SAINT CLOUD FL 34773

Title D  
Name MONTALVO, LUIS  
Address 9090 E IRLO BRONSON HWY  
City-State-Zip: SAINT CLOUD FL 34773

*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:** HECTOR GORDON

ED

04/28/2024

Electronic Signature of Signing Officer/Director Detail

Date