2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47862

Entity Name: IGLESIA MISIONERA FUENTE DE SALVACION, INC.

FILED Feb 20, 2025 Secretary of State 0168668395CC

Current Principal Place of Business:

1245 MCNEILL ROAD

NORTH FT. MYERS, FL 33903

Current Mailing Address:

% DOMINGO ANDUJAR 1175 WHITEHEAD CREEK FORT MYERS, FL 33916 US

FEI Number: 65-0324030 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ANDUJAR, DOMINGO 1175 WHITEHEAD CREEK FORT MYERS, FL 33916 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: DOMINGO ANDUJAR 02/20/2025

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT, SENIOR PASTOR Title TREASURER

Name ANDUJAR, DOMINGO Name SAGASTUME, ROSA Address 1175 WHITEHEAD CREEK Address 330 N.E 19TH AVE

City-State-Zip: FORT MYERS FL 33916 City-State-Zip: CAPE CORAL FL 33909

Title ASST. TREASURER Title ADVISOR / INTERNATIONAL

MISSIONS

Name AGUILAR, SANDRA Name CUELLO, JULIO
Address 510 NW 24TH TERRACE

Address 1507 SW 4TH CT.

City-State-Zip: CAPE CORAL FL 33993

City-State-Zip: CAPE CORAL FL 33993 City-State-Zip: CAPE CORAL FL 33901

Title DIRECTOR Title ASST. SECRETARY

 Name
 CUELLO, ESTER
 Name
 FELIZ, RAYMOND

 Address
 1507 SW 4TH CT.
 Address
 215 NW 4TH ST

City-State-Zip: CAPE CORAL FL 33991 City-State-Zip: CAPE CORAL FL 33993

Title CO-PASTOR Title SECRETARY

NameANDUJAR, ELIZABETHNameRIVERA, MARISOLAddress1175 WHITEHEAD CREEKAddress904 SE 5TH CT.

City-State-Zip: FORT MYERS FL 33916 City-State-Zip: CAPE CORAL FL 33990

Continues on page 2

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: ROSA SAGASTUME TREASURER 02/20/2025

Electronic Signature of Signing Officer/Director Detail

Date

Date

Officer/Director Detail Continued:

TitleELDERTitleASST. TREASURERNameARDON, WILFREDONameARDON, ROSIVERAddress1917 NE 20TH TERR.Address1917 NE 20TH TERR.City-State-Zip:CAPE CORAL FL 33909City-State-Zip:CAPE CORAL FL 33909