

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001876

Entity Name: COUPLES FOR CHRIST, INC.**Current Principal Place of Business:**315 WEST MAPLE AVENUE
MONROVIA, CA 91016**Current Mailing Address:**8418 STELLATA LN
C/O VIC LLADOC
ELK GROVE, CA 96578 US**FEI Number:** 65-0683561**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BARLAAN, ARTHUR
20505 CALLA LILY DR
LAND O LAKES, FL 34638 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	CHAIRMAN
Name	DACAYANAN, ROMEO JR.
Address	510 CEDAR LANE
City-State-Zip:	HAMILTON NJ 08610

Title	CORRESPONDING SECRETARY
Name	BARLAAN, ARTHUR S
Address	20505 CALLA LILY DR
City-State-Zip:	LAND O LAKES FL 34638

Title	DIRECTOR
Name	TANSECO, ROMEO V
Address	5440 ADAMSTOWN COMMONS DR
City-State-Zip:	ADAMSTOWN MD 21710

Title	DIRECTOR
Name	GUIRAO, DAVID PAUL M
Address	5 GLADSTONE WAY
City-State-Zip:	GREER SC 29650

Title	DIRECTOR
Name	JUTBA, SAM
Address	6421 WILLOUGHBY CIRCLE
City-State-Zip:	LAKE WORTH FL 33463

Title	DIRECTOR
Name	CALINGO, NOLI
Address	16253 GLEN ALDER CT
City-State-Zip:	LA MIRADA CA 90638

Title	DIRECTOR
Name	MALIBIRAN, LAUREL
Address	10933 GREYWALL LANE
City-State-Zip:	HUNTLEY IL 60142

Title	DIRECTOR
Name	FRANCISCO, JAMES JOSEPH
Address	6235 CURRENT DR
City-State-Zip:	SAN JOSE CA 95123

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: ARTHUR BARLAAN**SECRETARY****04/25/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date