

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007 8:00 am
Secretary of State

02-19-2007 90045 002 ****61.25

DOCUMENT # N03000010748 1. Entity Name MISSION LATINA CRISTIANA, INC.			
Principal Place of Business 2083 J&C BLVD NAPLES, FL 34109		Mailing Address 2083 J&C BLVD NAPLES, FL 34109	
2. Principal Place of Business - No P.O. Box # 2061 MCGREGOR BLVD		3. Mailing Address 2061 MCGREGOR BLVD	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State FORT MYERS, FL		City & State FORT MYERS, FL	
Zip 33901		Zip 33901	
Country US		Country US	
4. FEI Number 20-0484311		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FONSECA, ROOSEVELT A 2083 J&C BLVD NAPLES, FL 34109		7. Name and Address of New Registered Agent Name FONSECA, ROOSEVELT A. Street Address (P.O. Box Number is Not Acceptable) 2061 MCGREGOR BLVD City FORT MYERS FL 33901	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE X FONSECA ROOSEVELT A		SIGNATURE [Signature]	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
\$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOPEZ, MONICA C 2083 J&C BLVD NAPLES, FL 34109	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOPEZ, MONICA C. 3505 S LAUREL GREEN LN APT 201 NAPLES, FL 34119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FONSECA, ROOSEVELT A 2083 J&C BLVD NAPLES, FL 34109	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FONSECA ROOSEVELT A. 3505 S LAUREL GREEN LN APT 201 NAPLES, FL 34119.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALVAREZ, RAFAEL 1002 SE 12TH TERR APT D CAPE CORAL, FL 33909	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: [Signature]		DATE: 02/13/07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone # (239) 601-0249	