

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000222

FILED
May 02, 2009
Secretary of State

Entity Name: CENTRO CRISTIANO CASA DE MISERICORDIA INC.

Current Principal Place of Business:

10524 MOSS PARK RD
SUITE 204 PMB NO.105
ORLANDO, FL 32832

New Principal Place of Business:

3016 W. VINE STREET
KISSIMMEE, FL 34741

Current Mailing Address:

10524 MOSS PARK RD
SUITE 204 PMB NO.105
ORLANDO, FL 32832

New Mailing Address:

10524 MOSS PARK RD
SUITE 204 PMB NO. 105
ORLANDO, FL 32832

FEI Number: 02-0796419 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MELENDEZ, CARMEN M D
9939 LONG BAY DRIVE
ORLANDO, FL 32832 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MELENDEZ, CARMEN M
Address: PO BOX 780708
City-St-Zip: ORLANDO, FL 32878

Title: D () Delete
Name: MELENDEZ, SANDRA I
Address: PO BOX 780708
City-St-Zip: ORLANDO, FL 32878

Title: D () Delete
Name: MELENDEZ, JANETTE
Address: PO BOX 78078
City-St-Zip: ORLANDO, FL 32878

Title: D () Delete
Name: FERNANDEZ, CARMEN C
Address: PO BOX 780708
City-St-Zip: ORLANDO, FL 32878

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CARMEN M. MELENDEZ

D

05/02/2009

Electronic Signature of Signing Officer or Director

Date