

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010477

FILED
Apr 25, 2012
Secretary of State

Entity Name: CENTRO FAMILIAR CRISTIANO, INC.

Current Principal Place of Business:

296 FLAMINGO POINT NORTH
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

PO BOX 2208
JUPITER, FL 33468

New Mailing Address:

FEI Number: 51-0654082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, MIGUEL VD
296 FLAMING POINT NORTH
JUPITER, FL 33458 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: DP
Name: DA SILVA, JOSE
Address: 14661 79TH COURT NORTH
City-St-Zip: LOXACHATCHEE, FL 33470

Title: VD
Name: LOPEZ, MIGUEL
Address: 296 FLAMINGO POINT N
City-St-Zip: JUPITER, FL 33458

Title: D
Name: DA SILVA, SANTELMO
Address: 8745 URANUS TERRACE
City-St-Zip: LAKE PARK, FL 33403

Title: D
Name: ARAUJO, EDMUNDO
Address: 14661 79TH COUTR N.
City-St-Zip: WEST PALM BEACH, FL 33470

Title: D
Name: GROTHE, LEO
Address: 14661 79TH COUTR N.
City-St-Zip: WEST PALM BEACH, FL 33470

Title: D
Name: VALENCIA, GABRIEL
Address: 14661 79TH COUTR N.
City-St-Zip: WEST PALM BEACH, FL 33470

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: JOSE DASILVA

OD

04/25/2012

Electronic Signature of Signing Officer or Director

Date