

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 26, 2011
Secretary of State

DOCUMENT# N45642

Entity Name: CONGREGACION MITA DE FLORIDA, INC.**Current Principal Place of Business:**200 WEST LANCASTER RD.
ORLANDO, FL 32809**New Principal Place of Business:****Current Mailing Address:**200 WEST LANCASTER RD.
ORLANDO, FL 32809**New Mailing Address:****FEI Number:** 59-3092641**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SOTO, ISMAEL
6417 SHERYL ANN DR
ORLANDO, FL 32809 US**Name and Address of New Registered Agent:**ARROYO, MARIA M
6417 SHERYL ANN DR
ORLANDO, FL 32809 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: MARIA M. ARROYO

04/26/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD
Name: VERA, DAVID A
Address: 304 W LANCASTER ROAD
City-St-Zip: ORLANDO, FL 32809

Title: PD
Name: ARROYO, MARIA M
Address: 6417 SHERYL ANN DR
City-St-Zip: ORLANDO, FL 32809

Title: SD
Name: MAYR, BARBARA
Address: 150 ACAPULCO DR
City-St-Zip: KISSIMMEE, FL 34743

Title: TD
Name: RIVERA, JUANITA
Address: 1202 WAKULLA WAY
City-St-Zip: ORLANDO, FL 32839

Title: D
Name: ORTIZ, ELDA SARA
Address: 116 W BUCHANON AVE
City-St-Zip: ORLANDO, FL 32809

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: MARIA M. ARROYO

PD

04/26/2011

Electronic Signature of Signing Officer or Director

Date