

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 09, 2007 8:00 am
Secretary of State

07-09-2007 90042 016 ****87.50

DOCUMENT # N93000005391

1. Entity Name
**NICARAGUAN ATLANTIC COAST ANGLICAN MEMBERS
(N.A.C.A.M.), INC.**



Principal Place of Business
**55 FAIRWAY DR
5 E
MIAMI, FL 33166 US**

Mailing Address
**PO BOX 660513
MIAMI SPRING, FL 33266 US**

40123285



05312007 No Chg-NP CR2E037 (4/06)

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4. FEI Number
65-0452346

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TEMPLE, MARVIN
55 FAIRWAY DR. #5E
MIAMI SPRING, FL 33166**

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	GIL, CECILO
STREET ADDRESS	2637 ACAPULCO DR
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	SD
NAME	GILL, YVONNE
STREET ADDRESS	2637 ACAPULCO DR
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	T
NAME	BENARD, DAVID
STREET ADDRESS	3738 NW 23 AVE APT 1
CITY-ST-ZIP	MIAMI, FL 33142
TITLE	P
NAME	TEMPLE, MARVIN
STREET ADDRESS	55 FAIRWAY DR. #5E
CITY-ST-ZIP	MIAMI SPRING, FL 33166
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



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Detail by Document Number

Florida Non Profit Corporation

NICARAGUAN ATLANTIC COAST ANGLICAN MEMBERS (N.A.C.A.M.), INC.

Filing Information

Document Number N93000005391

FEI Number 650452346

Date Filed 11/30/1993

State FL

Status ACTIVE

Effective Date NONE

Last Event AMENDMENT

Event Date Filed 04/30/1997

Event Effective Date NONE

Principal Address

55 FAIRWAY DR
5 E
MIAMI FL 33166 US

Changed 05/26/2005

Mailing Address

PO BOX 660513
MIAMI SPRING FL 33266 US

Changed 08/02/2006

Registered Agent Name & Address

TEMPLE, MARVIN
55 FAIRWAY DR. #5E
MIAMI SPRING FL 33166

Name Changed: 08/30/2004

Address Changed: 09/21/2000

Officer/Director Detail

Name & Address

Title V

GIL, CECILO
2637 ACAPULCO DR