


FILE NOW: FILING FEE IS \$61.25

FILED

Mar 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000000557 (6)**

1. Corporation Name

ALIANZA CIVICA HISPANA DE LA FLORIDA CENTRAL, IN C.

Principal Place of Business

Mailing Address

**6220 S. ORANGE BLOSSOM TRL., STE. 142
ORLANDO FL 32809**

**6220 S. ORANGE BLOSSOM TRL., STE. 142
ORLANDO FL 32809**



3. Date Incorporated or Qualified

01/29/1996

4. FEI Number

APPLIED FOR

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

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

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CEPERO, ANGEL

**6220 S. ORANGE BLOSSOM TRL., STE. 142
ORLANDO FL 32809**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **CEPERO, ANGEL**
STREET ADDRESS **7809 SNOWBERRY CIR.**
CITY-ST-ZIP **ORLANDO FL 32819**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **BUSTAMANTE, HIRAM**
STREET ADDRESS **8658 CURRY FORD RD.**
CITY-ST-ZIP **ORLANDO FL 32825**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **PAYAS, ARMANDO**
STREET ADDRESS **1018 E. ROBINSON ST.**
CITY-ST-ZIP **ORLANDO FL 32801**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **RIVERA, JOSE R**
STREET ADDRESS **4150 MAU MAU LN.**
CITY-ST-ZIP **ORLANDO FL 32822**

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME **Valarino, Lizette**
4.3 STREET ADDRESS **3338 Netherwood Drive**
4.4 CITY-ST-ZIP **Orlando, Florida 32792**

TITLE **D** ☐ DELETE
NAME **DIAZ, VICTOR**
STREET ADDRESS **5029 TANGERINE AVE.**
CITY-ST-ZIP **WINTER PARK FL 32792**

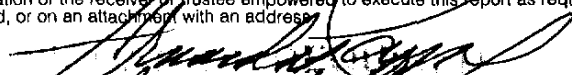
5.1 TITLE ☒ Change ☐ Addition
5.2 NAME **Lorenzo, Carlos**
5.3 STREET ADDRESS **100 S. Hughey Avenue**
5.4 CITY-ST-ZIP **Orlando, Florida 32801**

TITLE **D** ☐ DELETE
NAME **SERRANO, WALDEMAR**
STREET ADDRESS **137 ABBEY HOLLOW DR.**
CITY-ST-ZIP **APOPKA FL 32712**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



3/23/98 407-425-7723

CR2E037 (10/97)