

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 705795

**FILED**  
**Jan 08, 2021**  
**Secretary of State**  
**3374608472CC**

**Entity Name:** TAMIAMI METHODIST CHURCH, INC.

**Current Principal Place of Business:**

TAMIAMI METHODIST CHURCH, INC.  
1401 SW 8 ST  
MIAMI, FL 33135

**Current Mailing Address:**

TAMIAMI UNITED METHODIST CHURCH, INC.  
726 S.W. 14 AVENUE  
MIAMI, FL 33135 US

**FEI Number:** 59-0714833

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TORRES VILLAMIL, CAMILO  
10311 SW 128 AVE  
MIAMI, FL 33186 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:** CAMILO TORRES VILLAMIL

01/08/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHURCH COUNCIL-CHAIR  
Name VALDEZ, ALEIDA  
Address 2340 NW 24TH CT  
City-State-Zip: MIAMI FL 33142

Title CHILDREN'S MINISTRY  
Name DIAZ LOSADA, DALILA E  
Address 8450 SW 154 CIR CT  
APT 208  
City-State-Zip: MIAMI FL 33193

Title COMMITTEE ON FINANCE-  
CHAIRPERSON  
Name VELAZQUEZ, MAYLIN  
Address 3225 SW 7TH ST  
City-State-Zip: MIAMI FL 33135

Title COMMITTEE ON PASTOR-PARISH  
RELATIONS. CHAIRPERSON  
Name DIAZ LOSADA, DERISE EDNA  
Address 7728 ABBOTT AVE  
City-State-Zip: MIAMI BEACH FL 33141

Title TREASURER  
Name ALEIDA, MENDEZ  
Address 610 SW 13TH AVE  
APT 3  
City-State-Zip: MIAMI FL 33135

Title INTERPRETER OF CONNECTIONAL  
GIVING-CHAIR  
Name CORTES, ELIEZER  
Address 2960 SW 78TH AVE  
City-State-Zip: MIAMI FL 33155

Title PASTOR  
Name COTTO, EDWIN REV,  
Address 1635 SW 18TH ST  
City-State-Zip: MIAMI FL 33145

Title TRUSTEE  
Name TORRES VILLAMIL, CAMILO  
ERNESTO  
Address 10311 SW 128 AVE  
City-State-Zip: MIAMI FL 33186

*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:** CAMILO TORRES VILLAMIL

TRUSTEE

01/08/2021

Electronic Signature of Signing Officer/Director Detail

Date