

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739003

Entity Name: MISION LA COSECHA ORLANDO, INC.**Current Principal Place of Business:**1732 N GOLDENROD RD
ORLANDO, FL 32807**Current Mailing Address:**P.O. BOX 574572
ORLANDO, FL 32857-4572 US**FEI Number:** 59-2925689**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOPEZ, AGUSTIN DR.
1732 N. GOLDENROD RD.
ORLANDO, FL 32807 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:** DR. AGUSTIN LOPEZ

03/29/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, SENIOR PASTOR
Name LOPEZ, AGUSTIN DR.
Address 1732 N. GOLDENROD RD.
City-State-Zip: ORLANDO FL 32807

Title CLERK
Name ORTIZ, IVONNE
Address 1732 N. GOLDENROD RD.
City-State-Zip: ORLANDO FL 32807

Title TRUSTEE
Name CRUZ, CARMEN
Address 1732 N. GOLDENROD RD.
City-State-Zip: ORLANDO FL 32807

Title TRUSTEE
Name TORRES, JEREMIAH
Address 1732 N. GOLDENROD RD.
City-State-Zip: ORLANDO FL 32807

Title TRUSTEE
Name VARGAS, VICTOR
Address 1732 N. GOLDENROD RD.
City-State-Zip: ORLANDO FL 32807

Title PASTOR, TRUSTEE
Name LABOY, JORGE
Address 1732 N GOLDENROD RD
City-State-Zip: ORLANDO FL 32807

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: AGUSTIN LOPEZ

PRESIDENT

03/29/2019

Electronic Signature of Signing Officer/Director Detail

Date