

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 744143

**Entity Name:** SOLERA COMMUNITY CHURCH, INC.**Current Principal Place of Business:**4545 N.W. 103RD AVE.  
SUITE 100  
SUNRISE, FL 33351**Current Mailing Address:**4545 N.W. 103RD AVE.  
SUITE 100  
SUNRISE, FL 33351**FEI Number: 59-2471090****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAS, JIMMY  
5200 N. W. 65TH AVENUE  
LAUDERHILL, FL 33319 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

|                 |                        |
|-----------------|------------------------|
| Title           | PD                     |
| Name            | MAS, JIMMY             |
| Address         | 5200 N. W. 65TH AVENUE |
| City-State-Zip: | LAUDERHILL FL 33319    |

|                 |                     |
|-----------------|---------------------|
| Title           | SD                  |
| Name            | SOTO JR, ELSON      |
| Address         | 10450 NW 3RD STREET |
| City-State-Zip: | PLANTATION FL 33324 |

|                 |                     |
|-----------------|---------------------|
| Title           | TD                  |
| Name            | MAS, TERESA A       |
| Address         | 5200 NW 65TH AVENUE |
| City-State-Zip: | LAUDERHILL FL 33319 |

|                 |                     |
|-----------------|---------------------|
| Title           | VPD                 |
| Name            | LICHTMAN, ALAN      |
| Address         | 6002 SW 1ST STREET  |
| City-State-Zip: | PLANTATION FL 33317 |

|                 |                      |
|-----------------|----------------------|
| Title           | D                    |
| Name            | TRAPANI, SALVATORE   |
| Address         | 3211 PATRICIA CIRCLE |
| City-State-Zip: | E. NORRITON PA 19401 |

|                 |                        |
|-----------------|------------------------|
| Title           | D                      |
| Name            | MAS, DANIEL J          |
| Address         | 533 NE 3 AVE           |
| City-State-Zip: | FT LAUDERDALE FL 33301 |

*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: TERESA A. MAS****TREASURER/DIRECTOR 02/19/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date