

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767338

FILED
Mar 16, 2015
Secretary of State
CC4735988371

Entity Name: IGLESIA EVANGELICA MENONITA ARCAS DE SALVACION, INC.

Current Principal Place of Business:

3629 MICHIGAN AVENUE
FT MYERS, FL 33916

Current Mailing Address:

3629 MICHIGAN AVENUE
FT MYERS, FL 33916 US

FEI Number: 30-0049956

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MALDONADO, DAVID
3629 MICHIGAN AVE.
FORT MYERS, FL 33916 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 PASTOR
Name MALDONADO, DAVID
Address 3629 MICHIGAN AVE.
City-State-Zip: FORT MYERS FL 33916

Title ASSOCIATE PASTOR
Name PACHECO, ARMANDO
Address 373 MELODY COURT
City-State-Zip: FORT MYERS FL 33916

Title ASSOCIATE PASTOR
Name MALDONADO, MADELINE
Address 3629 MICHIGAN AVE.
City-State-Zip: FORT MYERS FL 33916

Title S
Name MALDONADO, JOSUE G
Address 800 FLOYD AVE. NORTH
City-State-Zip: LEHIGH ACRES FL 33971

Title TREASURER
Name GONZALEZ, WILMA
Address PO BOX 51517
City-State-Zip: FORT MYERS FL 33994

Title ASSOCIATE PASTOR
Name PACHECO, MARCELINA
Address 373 MELODY COURT
City-State-Zip: FORT MYERS FL 33916

Title ELDER
Name DIAZ MELOTTE, RUTH
Address 1209 CLAYTON AVE
City-State-Zip: LEHIGH ACRES FL 33972

Title ELDER
Name LOPEZ, LUIS
Address 4956 BILLY'S CREEK DR.
City-State-Zip: FORT MYERS FL 33905

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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: WILMA GONZALEZ

TREASURER

03/16/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ELDER
Name DELEON, OSVIN
Address 157 RIVERVIEW DR.
City-State-Zip: FORT MYERS FL 33905

Title ELDER
Name DIEGO, ANA
Address 5401 TICE ST
City-State-Zip: FORT MYERS FL 33905

Title ASSOCIATE PASTOR
Name DOMINGO, MARCIAL
Address 4830 HUNTERSGREEN DR.
City-State-Zip: FORT MYERS FL 33905