2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004930

Entity Name: IGLESIA MISIONERA INC.

Current Principal Place of Business:

274 SOUTH CENTER STREET PIERSON, FL 32180

Current Mailing Address:

274 S. CENTER ST. (US-17) PIERSON, FL 32180 US

FEI Number: 59-3110902 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OTERO, ELOISA 304 CYPRESS AVE STREET ADDRESS 2 APARTMENT OR SUITE NUMBERA CRESCENT CITY, FL 32112 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: ELOISA OTERO 03/25/2025

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PΠ Title **TREASURER** Name OTERO, ELOISA Name GOMEZ, MARIO

Address 111 PIQUE RD Address 5045 DE LEON OAKS COURTS City-State-Zip: DE LEON SPRINGS FL 32130 City-State-Zip: CRESCENT CITY FL 32112

Title **SECRETARY** Title Name OTERO, ELVIRA Name OTERO, BERNARDINO

Address 4815 FAIR PORT AVE. Address 4815 FAIR PORT AVE.

DELEON SPRINGS FL 32130 City-State-Zip: DE LEON SPRINGS FL 32130 City-State-Zip:

Title **DEACON** Title

RAMIREZ, GUADALUPE Name Name GOMEZ, MARTHA

226 JAFFA RD Address Address 5045 DE LEON OAKS COURT

City-State-Zip: CRESCENT CITY FL 32112 City-State-Zip: DELEON SPRINGS FL 32130

Title **OFFICER** Title DIRECTOR, VP

Name RENTERIA, ALVARO Name ORTIZ. ABIGAIL

Address 304 CYPRESS AVE Address 304 CYPRESS AVE APT. 1

City-State-Zip: CRECENT CITY FL 32112 City-State-Zip: CRESCENT CITY FL 32112

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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.

03/25/2025 SIGNATURE: ELOISA OTERO **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 25, 2025

Secretary of State

8664189208CC

Date

Officer/Director Detail Continued:

Title OFFICER

Name MARTINEZ, FERNANDO Address 229 E WASHINGTON AVE.

City-State-Zip: PIERSON FL 32180