2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03310

Entity Name: UNITED CHRISTIAN ASSEMBLIES, INC.

Current Principal Place of Business:

5531 GULF DR

NEW PORT RICHEY, FL 34652

Current Mailing Address:

PO BOX 516

PORT RICHEY, FL 34673 US

FEI Number: 59-3374869 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CRUZ, MIGUEL A. 12438 BELTRAN STREET HUDSON, FL 34669 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: MIGUEL CRUZ 03/04/2025

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PΠ Title EXECUTIVE SECRETARY, DIRECTOR

CRUZ, MIGUEL A CRUZ, CHRISTINE Name Name

12438 BELTRAN STREET 12438 BELTRAN STREET Address Address

City-State-Zip: HUDSON FL 34669 HUDSON FL 34669 City-State-Zip:

Title **ELDER** Title **ELDER**

Name BORGES, DOLORES Name ROSA, NELSON

Address 6304 RIDGECREST DRIVE Address 12448 INDIGO BUNTING ROAD PORT RICHEY FL 34668 City-State-Zip: City-State-Zip: WEEKI WACHEE FL 34614

Title **ELDER** Title **ELDER**

Name CERASARO, MARK Name SANTIAGO, SONIA

Address 7556 HOLLY LAKE LANE 1900 HARPOON DRIVE Address

City-State-Zip: NEW PORT RICHEY FL 34653 City-State-Zip: HOLIDAY FL 34690

Title **ELDER** Title **ELDER**

Name FUENTES, HILARIA FUENTES, HECTOR Name 8151 PENWOOD DRIVE Address 8151 PENWOOD DRIVE Address City-State-Zip: PORT RICHEY FL 34668

City-State-Zip: PORT RICHEY FL 34668

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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.

03/04/2025 SIGNATURE: MIGUEL A CRUZ **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 04, 2025

Secretary of State

0980985158CC

Date

Officer/Director Detail Continued:

Title TREASURER
Name RIOS, BRANDON

Address 13654 NEWBRIDGE ST
City-State-Zip: SPRING HILL FL 34609