2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2015
Secretary of State
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Entity Name: INTERNATIONAL HISPANIC HOUSE ASSOCIATION, INC.

Current Principal Place of Business:

1140 SW MARIGOLD PLACE
FORT WHITE, FL 32038

Current Mailing Address:

1140 SW MARIGOLD PLACE
FORT WHITE, FL 32038

FEI Number: 11-3822477

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHACON, REYFREDO REV.
1140 SW MARIGOLD PLACE
FORT WHITE, FL 32038 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	PRESIDENT
Name	CORTES, LUZ Z REV.
Address	1140 SW MARIGOLD PLACE
City-State-Zip:	FORT WHITE FL 32038

Title	VICE PRESIDENT 2
Name	PRIMALLES, JUAN C MINISTER
Address	25914 NW 182 AVE.
City-State-Zip:	HIGH SPRINGS FL 32643

Title	AT LARG - FINANCIAL CONSULTANT
Name	ROLLBERG, CONNIE MINISTER
Address	420 SOUTH ORANGE AVE. SUITE 150
City-State-Zip:	ORLANDO FL 32801

Title	EXECUTIVE SECRETARY
Name	RIVERA, EDDIE PASTOR
Address	556 SOUTH STREET
City-State-Zip:	HOLYOKE MA 01040

Title	VICE PRESIDENT 1
Name	CHACON, REINALDO MINISTER
Address	79 NW 34 TERR.
City-State-Zip:	MIAMI FL 33127

Title	TREASURER
Name	CHACON, REYFREDO REV.
Address	30 CHAPIN STREET
City-State-Zip:	HOLYOKE MA 01040

Title	AT LARG - MEDIA CONSULTANT
Name	JOHNSON, WILLIAM H MINISTER
Address	610 N. W. 1ST ST.
City-State-Zip:	LIVE OAK FL 32064

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: REV. LUZ Z. CORTES PRESIDENT 04/30/2015

Electronic Signature of Signing Officer/Director Detail — Date