| SUMMIT ST SORRENTO, | FL 32776 | | | |
|---------------------------------------|--|---|---------------------------------------|----------|
| Current Ma | illing Address: | | | |
| | - | | | |
| PO BOX 970 SORRENTO, FL 32776-0970 | | | | |
| SORREINI | 0, FL 32110-0910 | | | |
| FEI Numbe | er: 36-4680394 | | Certificate of Status De | esired |
| Name and | Address of Current Registered A | gent: | | |
| MIRELES, RO S ST SORRENTO, I | | | | |
| The above name | ed entity submits this statement for the purpose o | f changing its registered office or regis | tered agent, or both, in the State of | Florida. |
| SIGNATUR | E: | | | |
| | Electronic Signature of Registered Age | ent | | |
| Officer/Dire | ector Detail : | | | |
| Title | Ρ | Title | D | |
| Name | ARTIGAS, RAFAEL A | Name | BERMUDEZ, JAVIER G | |
| Address | W TRAIL | Address | T W CIRCLR | |
| City-State-Zip: | SORRENTO FL 32776 | City-State-Zip: | TAVARES FL 32778 | |
| | | | | |

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: EULALIA MIRELES

Electronic Signature of Signing Officer/Director Detail

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1000009783

Entity Name: IGLESIA BAUTISTA "LA GRACIA", SORRENTO, INC.

Current Principal Place of Business:

Title

Name

Address City-State-Zip: D

MIRELES, EULALIA

110S RHODES ST

MT DORA FL 32757

FILED Mar 15, 2021 **Secretary of State** 4365435696CC

status Desired: No

OFFICER

03/15/2021

Date

Date