

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000008421

Entity Name: EL CENTRO HISPANO DE TODAS LOS SANTOS INC**Current Principal Place of Business:**1900 SW 35 AVENUE
FORT LAUDERDALE, FL 33312**Current Mailing Address:**1900 SW 35 AVENUE
FORT LAUDERDALE, FL 33312 US**FEI Number: 47-3006709****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KNOTT, WILLIAM H
1900 SW 35 AVE
FORT LAUDERDALE, FL 33312 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	DIR
Name	SUAREZ, ROGER
Address	190 SW 35 AVE
City-State-Zip:	FORT LAUDERDALE FL 33312

Title	DIR
Name	ROSS, KERRY
Address	1900 SW 35 AVE
City-State-Zip:	FORT LAUDERDALE FL 33312

Title	DIR
Name	FLORES, ANA
Address	1900 SW 35 AVE
City-State-Zip:	FORT LAUDERDALE FL 33312

Title	DIRECTOR
Name	BIRGEL, RICHARD A
Address	1900 SW 35 AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33312

Title	DIRECTOR
Name	GRAY, COLLIN
Address	1900 SW 35 AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33312

Title	DIRECTOR
Name	BOZEK, ALLEN
Address	1900 SW 35 AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33312

Title	DIRECTOR
Name	HANDLEY, SALLY
Address	1900 SW 35 AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33312

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: ROGER SUAREZ**DIRECTOR****04/25/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date