

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000008137

**Entity Name:** CENTRO DE AVIVAMIENTO CRISTIANO WEST PALM BEACH, INC

**FILED**  
**Apr 24, 2024**  
**Secretary of State**  
**4808876896CC**

**Current Principal Place of Business:**

2740 PARKER AVE  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

2740 PARKER AVE  
WEST PALM BEACH, FL 33405 US

**FEI Number: 82-2441308**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

VILA MORALES, KEREN DR.  
5944 SNOWDROP WAY  
WEST PALM BEACH, FL 33415 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:** KEREN VILA MORALES

04/24/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name VILA SANTOYO, ORSON  
Address 1200 W 63RD ST  
City-State-Zip: HIALEAH FL 33012

Title VP  
Name MORALES DE VILA, NOEMI  
Address 1200 W 63RD ST  
City-State-Zip: HIALEAH FL 33012

Title PRESIDENT  
Name VILA MORALES, KEREN  
Address 6301 MYRTLEWOOD CIR W  
City-State-Zip: PALM BEACH GARDENS FL 33418

*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:** KEREN VILA MORALES

PRESIDENT

04/24/2024

Electronic Signature of Signing Officer/Director Detail

Date