

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000002085

**Entity Name:** CENTRO DE ADORACION ADONAI, INC.

**Current Principal Place of Business:**

11126 WINDHAVEN DR S  
NONE  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

11126 WINDHAVEN DRIVE SOUTH  
NONE  
JACKSONVILLE, FL 32225 US

**FEI Number: 59-3466747**

**Certificate of Status Desired: No**

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

FERNANDEZ, DELBIS REV  
11126 WINDHAVEN DR. S.  
NONE  
JACKSONVILLE, FL 32225 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 D  
Name FERNANDEZ, DELBIS REV  
Address 11126 WINDHAVEN DR. S  
City-State-Zip: JACKSONVILLE FL 32225

Title D  
Name FERNANDEZ, HECTOR N REV  
Address 11126 WINDHAVEN DR. S  
City-State-Zip: JACKSONVILLE FL 32225

Title D  
Name NAIL, DEBORA J  
Address 3875 S SAN PABLO RD APT 904  
City-State-Zip: JACKSONVILLE FL 32224

Title D  
Name FERNANDEZ, SADOE  
Address 11126 WINDHAVEN DR S  
City-State-Zip: JACKSONVILLE FL 32225

*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: DELBIS N FERNANDEZ**

**REV**

**02/26/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date