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SECRETARY OF STATE TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 732500

1. Corporation Name Iglesia Pentecostal Camino a la Gloria INC Assemblies of God

Principal Place of Business Mailing Address PO Box 1711 Clewiston FL 33440 US. PO Box 1711 Clewiston 33440 Florida US

3. Date Incorporated or Qualified 4-22-1975 3a. Date of Last Report 6-13-95 4. FEI Number 59-193588 Applied For Not Applicable 5. Certificate of Status Desired X \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution 5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 22 City & State 27 City & State 23 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent MANUEL MANZANO 2820 55th W Lehigh Acres Florida 33971

10. Name and Address of New Registered Agent 81 Name MANUEL MANZANO 82 Street Address (P.O. Box Number is Not Acceptable) 2820 5th Street West 83 Lehigh Acres 84 City FL 85 Zip Code 33971

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Manuel Manzano DATE 6-30-96

12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE D President 1.2 NAME MANUEL MANZANO 1.3 STREET ADDRESS 2820 5th St. 1.4 CITY-ST-ZIP Lehigh Acres, FL 33971 2.1 TITLE D Treasurer 2.2 NAME MONTESINO DAISY 2.3 STREET ADDRESS 521 E VENTURA AVE 2.4 CITY-ST-ZIP CLEWISTON FL. 33440 3.1 TITLE D SECRETARY 3.2 NAME ? 3.3 STREET ADDRESS ? 3.4 CITY-ST-ZIP ? 4.1 TITLE T DEACON 4.2 NAME ROSENADE MALDONADO 4.3 STREET ADDRESS 800 E. EL PASO 4.4 CITY-ST-ZIP CLEWISTON, FLA. 33440 5.1 TITLE T DEACON 5.2 NAME DANIEL GONZALEZ 5.3 STREET ADDRESS AVE L 471 5.4 CITY-ST-ZIP MOORE HAVEN, FL 33471 6.1 TITLE T DIRECTOR OF SUNDAY SCHOOL 6.2 NAME Cheryl STOKER 6.3 STREET ADDRESS Rt. 1. Box 71 A 6.4 CITY-ST-ZIP CLEWISTON, FL. 33440

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Manuel Manzano DATE 6-30-96

CR2E037 (12/95)