## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**DOCUMENT#760889** 

FILED Nov 01, 2006 Secretary of State

Entity Name: SOUTHEASTERN SPANISH DISTRICT COUNCIL OF THE ASSEMBLIES OF GOD, INC.

Current Principal Place of Business: New Principal Place of Business:

830 CALIFORNIA WOODS CIRCLE ORLANDO, FL 32824 US

Current Mailing Address: New Mailing Address:

830 CALIFORNIA WOODS CIRCLE ORLANDO, FL 32824 US

FEI Number: 59-1935588 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ROJAS, RAMON J
830 CALIFORNIA WOODS CIR
ORLANDO, FL 32824 US

MARTINEZ, EDWARD
830 CALIFORNIA WOODS CIR
ORLANDO, FL 32824 US

ORLANDO, FL 32824 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: EDWARD MARTINEZ 11/01/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition Name: ROSADO, ANGEL L Name: ESPINOSA, JOSE E

 Address:
 103 PALM SPRING DRIVE
 Address:
 PO BOX 990264

 City-St-Zip:
 LONGWOOD, FL 32750
 City-St-Zip:
 NAPLES, FL 34116

Title: PD ( ) Delete Title: ( ) Change ( ) Addition Name: MARTINEZ, EDWARD Name:

 Name:
 MARTINEZ, EDWARD
 Name:

 Address:
 1527 ANTIGUA DRIVE
 Address:

 City-St-Zip:
 ORLANDO, FL 32824
 City-St-Zip:

 Name:
 ROJAS, RAMON J
 Name:
 ROJAS, RAMON J

 Address:
 P.O. BOX 35794
 Address:
 728 SHADOWMOSS DRIVE

 City-St-Zip:
 GAINSVILLE, FL 32615
 City-St-Zip:
 WINTER GARDEN, FL 34787

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 PEREZ, ORLANDO
 Name:
 PEREZ, ORLANDO

 Address:
 901 ALSACE DR
 Address:
 2602 MAGGIORE CIRCLE

 City-St-Zip:
 KISSIMMEE, FL 34759
 City-St-Zip:
 KISSIMMEE, FL 34746

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDWARD MARTINEZ PD 11/01/2006