2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 760889

Jul 18, 2008
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:

MARTINEZ, EDWARD
830 CALIFORNIA WOODS CIR
ORLANDO, FL 32824 US
GONZALEZ, SATURNINO
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: SATURNINO GONZALEZ 07/18/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: MARTINEZ, EDWARD Name: GONZALEZ, SATURNINO Address: 1527 ANTIGUA DRIVE Address: 850 WHISPERING CYPRESS LANE

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

Title: VD () Delete Title: () Change () Addition Name: ESPINOSA, JOSE E Name: Address: PO BOX 990264 Address:

 Address:
 PO BOX 990264
 Address:

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

Title: S/T () Delete Title: SD (X) Change () Addition Name: ROJAS, RAMON J Name: ROJAS, RAMON J

Address: 728 SHADOWMOSS DRIVE Address: 728 SHADOWMOSS DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787

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

 Name:
 Name:
 FELICIANO, JIMIRO

 Address:
 3279 HAMPTON DRIVE

 City-St-Zip:
 City-St-Zip:
 ALVA, FL 33920

I hereby certify that the information supplied with this filing does not qualify 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: RAMON J ROJAS S 07/18/2008