

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007695

FILED  
Feb 05, 2012  
Secretary of State

**Entity Name:** IGLESIA DE DIOS LA HERMOSA IN JACKSONVILLE, INC.

**Current Principal Place of Business:**

IGLESIA DE DIOS  
6007 SEABOARD AVE  
JACKSONVILLE, FL 32244

**New Principal Place of Business:**

IGLESIA DE DIOS LA HERMOSA  
4325 HIGHWAY 17 SOUTH  
FLEMING ISLAND, FL 32003

**Current Mailing Address:**

P.O. BOX 7537  
JACKSONVILLE, FL 32238 US

**New Mailing Address:**

FEI Number: 89-0326641      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RAMOS, EVELYN  
5658 SHADY PINE ST. SOUTH  
JACKSONVILLE, FL 32244 US

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

RAMOS, EVELYN  
5826 LISKA DR  
JACKSONVILLE, FL 32244 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: EVELYN RAMOS

02/05/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: TEJEDA, FERMIN  
Address: 7773 ROCKRIDGE DR  
City-St-Zip: JACKSONVILLE, FL 32244

Title: STD  
Name: RAMOS, EVELYN  
Address: 5826 LISKA DR  
City-St-Zip: JACKSONVILLE, FL 32244

Title: OD  
Name: DOMENECH, ANA  
Address: 1517 TIMBER TRECE DR.  
City-St-Zip: AUGUSTINE, FL 32092

Title: OD  
Name: MEJIAS, DAVID  
Address: 13532 ASHFORD WOOD CT.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: OD  
Name: MARTINEZ, CRUZ MANUEL  
Address: 1517 TIMBER TRECE DR  
City-St-Zip: AUGUSTINE, FL 32092

Title: OD  
Name: TEJEDA, SYLVIA  
Address: 7773 ROCKRIDGE DR  
City-St-Zip: JACKSONVILLE, FL 32244

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: EVELYN RAMOS

STD

02/05/2012

Electronic Signature of Signing Officer or Director

Date