

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011961

FILED
Apr 21, 2009
Secretary of State

Entity Name: CENTRO CRISTIANO COMPARTIENDO EL PAN DE VIDA, INC.

Current Principal Place of Business:

2367 FORTUNE RD.
KISSIMMEE, FL 347434304

New Principal Place of Business:

Current Mailing Address:

2400 GLENRIDGE AVE.
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REYES, JUAN
2400 GLENRIDGE AVE.
KISSIMMEE, FL 34746 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REYES, JUAN
Address: 2400 GLENRIDGE AVE
City-St-Zip: KISSIMMEE, FL 34746

Title: V () Delete
Name: CARABALLO, ELIEZER
Address: 363 LA PAZ DR
City-St-Zip: KISSIMMEE, FL 34743

Title: S () Delete
Name: PAGANI, CARMEN L
Address: 363 LA PAZ DR
City-St-Zip: KISSIMMEE, FL 34743

Title: T () Delete
Name: GARCIA, GLORIA
Address: 1546 BIRCHWOOD AVE
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: RIVERA, CARMEN J
Address: 2007 KELLY ST
City-St-Zip: KISSIMMEE, FL 34744

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JUAN REYES

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date