

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31913

FILED  
Feb 23, 2010  
Secretary of State

**Entity Name:** EL REDENTOR PRESBYTERIAN CHURCH OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

6971 RED BUG LAKE RD.  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

6971 RED BUG LAKE RD.  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 59-2235279

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GONZALEZ, TONITA  
579 PORTLAND CIRCLE  
APOPKA, FL 32703 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: PD  
Name: RAMOS, ROBERTO  
Address: 1471 CANAL CROSS CT  
City-St-Zip: OVIEDO, FL 32765

Title: D  
Name: LOPEZ, WANDA  
Address: 481 WELLESLEY ST  
City-St-Zip: OVIEDO, FL 32765

Title: D  
Name: BONILLA, NOE  
Address: 3129 HORIZON PLACE  
City-St-Zip: OVIEDO, FL 32765

Title: D  
Name: MORALES, EDWIN  
Address: 878 CANEEL BAY TERRACE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: SD  
Name: MARTINEZ, GRISELLE  
Address: 5147 ARDMORE DRIVE  
City-St-Zip: WINTER PARK, FL 32792

Title: D  
Name: GONZALEZ, FELIX  
Address: 579 PORTLAND CIRCLE  
City-St-Zip: APOPKA, FL 32703

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: TONITA GONZALEZ

AGEN

02/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date