

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47862

FILED
Apr 16, 2008
Secretary of State

Entity Name: IGLESIA FUENTE DE SALVACION MISIONERA, INC.

Current Principal Place of Business:

1247 MC NIEL RD
NORTH FT. MYERS, FL 33903 US

New Principal Place of Business:

Current Mailing Address:

% JULIO C. CUELLO
1507 SW 4TH COURT
CAPE CORAL, FL 33991

New Mailing Address:

FEI Number: 65-0324030 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUELLO, JULIO C.
1507 SE 4TH COURT
CAPE CORAL, FL 33991 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: CUELLO, JULIO
Address: 1507 SW 4TH CT.
City-St-Zip: CAPE CORAL, FL 33991 US

Title: T () Delete
Name: AGUILAR, SANDRA Y
Address: 510 NW 24TH TERRACE
City-St-Zip: CAPE CORAL, FL 33993 US

Title: S () Delete
Name: VELEZ, SAMUEL
Address: 326 SW 19TH LANE
City-St-Zip: CAPE CORAL, FL 33991 US

Title: V () Delete
Name: ANDUJAR, DOMINGO
Address: 1175 WHITEHEAD CREEK LOOP
City-St-Zip: FORT MYERS, FL 33916 US

Title: D () Delete
Name: CUELLO, ESTER
Address: 1507 SW 4TH CT.
City-St-Zip: CAPE CORAL, FL 33991 US

Title: D () Delete
Name: FELIZ, RAYMOND
Address: 215 NW 4TH ST
City-St-Zip: CAPE CORAL, FL 33993 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JULIO CUELLO

P

04/16/2008

Electronic Signature of Signing Officer or Director

Date