

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002136

FILED
Feb 21, 2009
Secretary of State

Entity Name: SEGUNDA IGLESIA BAUTISTA HISPANA DE DELTONA (ABC), INC.

Current Principal Place of Business:

502 TACOMA AVE
DELTONA, FL 32725

New Principal Place of Business:

Current Mailing Address:

502 TACOMA AVE.
DELTONA, FL 32725

New Mailing Address:

FEI Number: 59-3244059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEREZ, ROBERTO
502 TACOMA AVE.
DELTONA, FL 327258333 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 () Delete
Name: PEREZ, ROBERTO
Address: 502 TACOMA AVE.
City-St-Zip: DELTONA, FL 32725

Title: T () Delete
Name: MENDOZA, ISAAC
Address: 1421 SECTION LANE TER
City-St-Zip: DELTONA, FL 32725

Title: SD () Delete
Name: PEREZ, LEIDA
Address: 502 TACOMA AVE.
City-St-Zip: DELTONA, FL 32725

Title: D () Delete
Name: MALAQUIAS, BOSQUES
Address: 502 TACOMA AVE.
City-St-Zip: DELTONA, FL 32725

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
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: ROBERTO PEREZ NAVARRO

P/D

02/21/2009

Electronic Signature of Signing Officer or Director

_____ Date