

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000534

FILED
Apr 29, 2004
Secretary of State**Entity Name:** IGLESIA BAUTISTA CENTRAL DE ORLANDO, INC.**Current Principal Place of Business:**2160 HIAWASSEE RD
ORLANDO, FL 32818 US**New Principal Place of Business:****Current Mailing Address:**2160 HIAWASSEE RD
ORLANDO, FL 32818 US**New Mailing Address:****FEI Number:** 59-3363633**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAVILA, LOUIS
911 N MAIN ST
KISSIMMEE, FL 34744**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:** D () Delete
Name: FLORES, JUANITA
Address: 2359 ATRIUM CIRCLE
City-St-Zip: ORLANDO, FL 32808**Title:** D () Delete
Name: DAVILA, LOUIS
Address: 911 N MAIN ST
City-St-Zip: KISSIMMEE, FL 34744**Title:** PAST () Delete
Name: HERNANDEZ, ELI
Address: 1098 HIAWASSEE RD
City-St-Zip: ORLANDO, FL 32818**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change () Addition
Name: FELICIANO, CESAR
Address: 4612 BALBOA DRIVE
City-St-Zip: ORLANDO, FL 32808**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** PAST (X) Change () Addition
Name: HERNANDEZ, ELI
Address: 8239 WILLOW WOOD ST.
City-St-Zip: ORLANDO, FL 32818**Title:** D () Change (X) Addition
Name: BURGOS, MARILUZ
Address: 1859 WEDGEWOOD WAY
City-St-Zip: KISSIMMEE, FL 34746**Title:** D () Change (X) Addition
Name: FLORES, JOSE J
Address: 5403 BAY LAGOON CIRCLE
City-St-Zip: ORLANDO, FL 32819**Title:** D () Change (X) Addition
Name: HERNANDEZ, APRILIS Y
Address: 8239 WILLOW WOOD ST
City-St-Zip: ORLANDO, FL 32818

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LOUIS DAVILA

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date