## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9600000534

FILED Mar 27, 2007 Secretary of State

Entity Name: IGLESIA BAUTISTA CENTRAL DE ORLANDO, INC. **Current Principal Place of Business: New Principal Place of Business:** 2160 HIAWASSEE RD ORLANDO, FL 32818 US **Current Mailing Address: New Mailing Address:** 2160 HIAWASSEE RD ORLANDO, FL 32818 US FEI Number: 59-3363633 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BURGOS, MARILUZ 1859 WEÓGEWOOD WAY KISSIMMEE, FL 34746 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete FELICIANO, CESAR DEACON SOTO, FERNANDO PASTOR Name: Name: 4612 BALBOA DRIVE Address: 2160 HIAWASSEE ROAD Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32818 Title: () Delete Title: (X) Change ( ) Addition Name: FLORES, JOSE J Name: FLORES, JOSE J DEACON Address: 5403 BAY LAGOON CIR Address: 5403 BAY LAGOON CIR City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819 Title: () Delete Title: (X) Change ( ) Addition BURGOS, MARILUZ DEACON Name: DAVILA, LUIS DEACON Name: 1859 WEDGEWOOD WAY 4141 BIG VALLEY BLVD Address: Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: KISSIMMEE, FL 34746 Title: () Delete Title: ( ) Change (X) Addition Name: Name: FLORES, JUANITA DEACON 2359 ATRIUM CIRCLE Address: Address: City-St-Zip: 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 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: LUIS DAVILA D 03/27/2007