

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 17, 2005
Secretary of State**

DOCUMENT# N96000003403

Entity Name: THE HISPANIC CHURCH OF GOD (SEVENTH DAY), INC.

Current Principal Place of Business:

HISPANIC CHURCH OF GOD (SEVENTH DAY)
113 SOUTH FIRST ST
HAINES CITY, FL 33849

New Principal Place of Business:

Current Mailing Address:

P O BOX 1074
HAINES CITY, FL 33845

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORA, MARIO
701 RUBY CT
DUNDEE, FL 33838 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: BRITO, PEDRO
Address: 116 S 4TH STREET
City-St-Zip: HAINES CITY, FL 33844

Title: VD () Delete
Name: HILARIO, ROMAN
Address: 2125 JOHNSON AVE
City-St-Zip: HAINES CITY, FL 33844

Title: SD () Delete
Name: BRITO, RUTH
Address: 3127 EAST HISON AVE
City-St-Zip: HAINES CITY, FL 33844

Title: TD () Delete
Name: MARTINEZ, POMPEYO
Address: 1018 NORMA AVE
City-St-Zip: HAINES CITY, FL 33844

Title: D () Delete
Name: HUMBERTO, LOPEZ
Address: 2125 EAST HINSON AVE # 1
City-St-Zip: HAINES CITY, FL 33844

Title: D () Delete
Name: SANTANA, SAUL
Address: 2125 JOHNSON AVE # 2
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: SAUL, SANTANA
Address: 125 E JOHNSON AVE APT 2
City-St-Zip: HAINES CITY, FL 33844

Title: SD (X) Change () Addition
Name: GARDUNO, MIGUEL
Address: 3601 BAKER AVE APT 98
City-St-Zip: HAINES CITY, FL 33844

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

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

Title: D (X) Change () Addition
Name: JAIME, REYES
Address: PO BOX 403
City-St-Zip: LAKE HAMILTON, FL 33851

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: PEDRO BRITO

PD

02/17/2005

Electronic Signature of Signing Officer or Director

_____ Date