

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003893

FILED
Jun 30, 2005
Secretary of State

Entity Name: EL SHADDAI CHRISTIAN CHURCH INC

Current Principal Place of Business:

9421 S ORANGE BLOSSOM TRAIL
SUITE 14
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

9421 S ORANGE BLOSSOM TRAIL
SUITE 14
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 59-3455931 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ACEVEDO, NICK
487 CHICAGO WOODS CIRCLE
ORLANDO, FL 32824 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: ACEVEDO, NICK
Address: 487 CHICAGO WOODS CIR
City-St-Zip: ORLANDO, FL 32824

Title: VD () Delete
Name: VARGAS, DAVID
Address: 1739 BROOK HOLLOW DR
City-St-Zip: ORLANDO, FL 32824

Title: SD () Delete
Name: ACEVEDO, YORDANIA
Address: 487 CHICAGO WOODS CIR
City-St-Zip: ORLANDO, FL 32824

Title: SD () Delete
Name: CALDERON, EDDA
Address: 415 CHICAGO WOODS CIR
City-St-Zip: ORLANDO, FL 32824

Title: TD () Delete
Name: GONZALEZ, JOSE
Address: 223 N FINLEY AVE
City-St-Zip: KISSIMMEE, FL 34741

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:

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

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: NICK ACEVEDO

PD

06/30/2005

Electronic Signature of Signing Officer or Director

_____ Date