

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002176

FILED
Apr 28, 2009
Secretary of State

Entity Name: FOUNDATION FOR CHRISTIAN VALUES, INC.

Current Principal Place of Business:

8600 N.W. 53RD TERRACE
STE 201
MIAMI, FL 33166 US

New Principal Place of Business:

Current Mailing Address:

8600 N.W. 53RD TERRACE
STE 201
MIAMI, FL 33166 US

New Mailing Address:

FEI Number: 65-0880323 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PIMENTEL, ROBERTO
7170 SW 17TH TERR
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

MERIZALDE, LUIS D
520 N VEGA ST
ALHAMBRA, FL 91801 US

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: LUIS D. MERIZALDE

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PIMENTAL, ROBERTO
Address: 7170 SW 17TH TERR
City-St-Zip: MIAMI, FL 33155

Title: VPD () Delete
Name: MERIZALDE, LUIS D
Address: 805 NOVELDA RD.
City-St-Zip: ALHAMBRA, CA 91801

Title: S () Delete
Name: JOSE, RAUL S
Address: 10310 NW 129 ST
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: TD () Delete
Name: JOSE, RAUL S
Address: 10310 NW 129 ST
City-St-Zip: HIALEAH GARDENS, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MERIZALDE, LUIS D
Address: 520 N VEGA ST
City-St-Zip: ALHAMBRA, CA 91801

Title: VPD (X) Change () Addition
Name: SAN JOSE, RAUL
Address: 10310 NW 129 ST
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: S (X) Change () Addition
Name: CABRERA, OFELIA
Address: 17955 E. SUNRISE DR.
City-St-Zip: ROWLAND HEIGHTS, CA 91748

Title: TD (X) Change () Addition
Name: CABRERA, OFELIA Y
Address: 17955 E. SUNRISE DR.
City-St-Zip: ROWLAND HEIGHTS, CA 91748

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: LUIS D. MERIZALDE

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date