

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**


**FILED**  
**Mar 24, 2006 8:00 am**  
**Secretary of State**

03-14-2006 90014 048 \*\*\*\*70.00

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1st MOORE CR2E037 (10/05)

DOCUMENT # N98000005909 1. Entity Name IGLESIA PENTECOSTAL LA GRAN COMISION INC.					
Principal Place of Business 13122 CROWELL ROAD BROOKSVILLE FL 34613		Mailing Address 13122 CROWELL ROAD BROOKSVILLE FL 34613			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		4. FEI Number 59-3538436 Applied For <input type="checkbox"/> Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent PACHECO, CONRADO 13122 CROWELL ROAD BROOKSVILLE FL 34613			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent (and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PACHECO, CONRADO		NAME		
STREET ADDRESS	13122 CROWELL ROAD		STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL 34613		CITY-ST-ZIP		
TITLE	VPD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PACHECO, MARIA		NAME		
STREET ADDRESS	13122 CROWELL ROAD		STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL 34613		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LIOBIGILDO, BENITEZ		NAME		
STREET ADDRESS	10151 FOLEY ST.		STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL 34601		CITY-ST-ZIP		
TITLE	TS	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PACHECO, MARIA		NAME		
STREET ADDRESS	13122 CROWELL RD		STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL 34613		CITY-ST-ZIP		
TITLE	P.D. - Rev. Conrado Pacheco Sr.	<input type="checkbox"/> Delete	TITLE	Rev. Conrado PACHECO SR.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS	13122 Crowell Rd.		STREET ADDRESS	13122 Crowell Rd.	
CITY-ST-ZIP	BROOKSVILLE FL 34613		CITY-ST-ZIP	BROOKSVILLE FL 34613	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Rev. Conrado Pacheco Sr.</u> <u>Conrado Pacheco Sr.</u> <u>3-1-06</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <span style="float: right;">352 Daytime Phone # 5-971162</span>					