

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006997

FILED  
May 04, 2010  
Secretary of State

Entity Name: LIGHT FOR THE NATIONS CHURCH, INC.

## Current Principal Place of Business:

400 NW 4TH AVENUE  
MULBERRY, FL 33860 US

## New Principal Place of Business:

10235 GOLDENBROOK WAY  
TAMPA, FL 33647 US

## Current Mailing Address:

400 NW 4TH AVENUE  
MULBERRY, FL 33860 US

## New Mailing Address:

10235 GOLDENBROOK WAY  
TAMPA, FL 33647 US

FEI Number: 59-3559537      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:

ARGUELLES, EDUARDO  
400 NW 4TH AVENUE  
MULBERRY, FL 33860 US

## Name and Address of New Registered Agent:

ORTIZ, WILFREDO  
10235 GOLDENBROOK WAY  
TAMPA, FL 33647 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: ORTIZ WILFREDO

05/04/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D  
Name: ORTIZ, JONOTHON  
Address: 10235 GOLDENBROOK WAY  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: ARGUELLES, ANNA RACH  
Address: 5078 WILLIAMSTOWN BLVD  
City-St-Zip: LAKELAND, FL 33810

Title: D  
Name: ARGUELLES, EDUARDO G  
Address: 11705 OLD DADE CITY ROAD  
City-St-Zip: KATHLEEN, FL 33849

Title: D  
Name: ORTIZ, CARLA J  
Address: P O BOX 292066 N/A  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: SOLIS, SARA B  
Address: PO BOX 428  
City-St-Zip: KATHLEEN, FL 33849

Title: D  
Name: SOLIS, SARA  
Address: PO BOX 428  
City-St-Zip: KATHLEEN, FL 33849

I hereby 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 all other like empowered.

SIGNATURE: ORTIZ WILFREDO

D

05/04/2010

Electronic Signature of Signing Officer or Director

Date