

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001792

FILED
Apr 14, 2009
Secretary of State

Entity Name: HISPANIC EBENEZER CHRISTIAN CHURCH, INC.

Current Principal Place of Business:

9025 49TH ST
PINELLAS PARK, FL 33782

New Principal Place of Business:

Current Mailing Address:

9025 49TH ST
PINELLAS PARK, FL 33782

New Mailing Address:

FEI Number: 59-3430479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDINA, JOSE A
4088 EVERETT AVENUE
SPRING HILL,, FL 34609 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: P () Delete
Name: MEDINA, JOSE A
Address: 4088 EVERETT AVENUE
City-St-Zip: SPRING HILL, FL 34609

Title: T () Delete
Name: TIRADO, DORA
Address: 2401 GRANADA CIR WEST
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: SC () Delete
Name: TIRADO, DORA
Address: 2401 GRANADA CIR WEST
City-St-Zip: ST PETERSBURG, FL 33712

Title: PD () Delete
Name: MEDINA, AMADA
Address: 4088 EVERETT AVENUE
City-St-Zip: SPRING HILL, FL 34609

Title: D () Delete
Name: TIRADO, RAMON
Address: 2401 GRANADA CR. WEST
City-St-Zip: ST PETERSBURG, FL 33712

Title: PRES () Delete
Name: MEDINA, JOSE A PRESIDE
Address: 4088 EVERETT AVE
City-St-Zip: SPRING HILL, FL 34609 HE

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
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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 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: JOSE A. MEDINA

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date