## 2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N10000008600

Entity Name: REY DE REYES CHRISTIAN CHURCH INC.

FILED Nov 04, 2015 Secretary of State CC9724849282

## **Current Principal Place of Business:**

1725 S.VOLUSIA OR HWY 17-92 ORANGE CITY, FL 32763

## **Current Mailing Address:**

765 JAMESON DR

ORANGE CITY, FL 32763

FEI Number: 32-0320701 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SHEPPARD, RHODE PASTOR 765 JAMESON DRIVE ORANGE CITY, FL 32763 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title D Title D

NameSHEPPARD, RHODE PASTORNameROSENDO, VICTORAddress765 JAMESSON DRIVEAddress1055 SULLIVAN ST

City-State-Zip: ORANGE CITY FL 32763 City-State-Zip: DELTONA FL 32725

Title D Title D

NameROSENDO, LUZNameHERNANDEZ, MARGARITAAddress1055 SULLIVAN STAddress1576 BRAMORDUNES APT CCity-State-Zip:DELTONA FL 32725City-State-Zip:ORANGE CITY FL 32763

Title D Title D

Name CASTILLO, IRIS M Name ALICEA, ANDREA

Address 829 UPPERCASE RD APT 106 BLDG Address 1345 AZORA STREET

City-State-Zip: DELTONA FL 32725

City-State-Zip: ORANGE CITY FL 32763

Title T

Name CANALES, JUAN Address 765 JAMESON DR.

City-State-Zip: ORANGE CITY FL 32763

SIGNATURE: RHODE SHEPPARD

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.

D

Electronic Signature of Signing Officer/Director Detail

11/04/2015

Date