

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716836

FILED
Feb 25, 2009
Secretary of State

Entity Name: IGLESIA BAUTISTA GETSEMANI, INC.

Current Principal Place of Business:

5298 N.W. 7TH ST.
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

5298 N.W. 7TH ST.
MIAMI, FL 33126

New Mailing Address:

FEI Number: 59-2226611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, ARACELY
1790 SW 16 ST
MIAMI, FL 33145 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: DS () Delete
Name: ARIAS, CONSUELO
Address: 53 NW 109TH CT
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: HECTOR, JORDAN
Address: 3602 NW 6 ST
City-St-Zip: MIAMI, FL 33125

Title: D () Delete
Name: MARTIN, ALEXIS
Address: 5273 NW 4 TERR
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: RODRIGUEZ, JOSUE
Address: 11750 SW 18TH ST APT 229
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: BUSTAMANTE, DANIEL
Address: 930 NW 23 AVE
City-St-Zip: MIAMI, FL 33125

Title: P () Delete
Name: ANFONSO, ODELFA
Address: 101 SW 62 COURT
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MANUEL, ALVAREZ
Address: 13950 SW 16 TERRACE
City-St-Zip: MIAMI, FL 33175

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
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: CONSUELO ARIAS

DS

02/25/2009

Electronic Signature of Signing Officer or Director

Date