

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 29, 1999 8:00am

Secretary of State

01-29-1999 90062 045 *****70.00

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 733137

1. Corporation Name

"IGLESIA NI CRISTO" CHURCH OF CHRIST, INC.

Principal Place of Business

4550 FIRESTONE ROAD
JACKSONVILLE FL 32210

Mailing Address

1617 SOUTHGATE AVENUE
CORPORATE AFFAIRS DEPT.
DALY CITY CA 94015



2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

3. Date Incorporated or Qualified

06/23/1975

4. FEI Number

23-7087109

Applied For
Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

24 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VILLANUEVA, FLORANTE S
7066 PRELLIE STREET
JACKSONVILLE FL 32210

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MANALO, ERANO G
STREET ADDRESS CORNER CENTRAL & COMMONWEALTH AVENUES
CITY-ST-ZIP DILIMAN, QUEZON CITY, PHILIP 1107

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE V
NAME MANALO, EDUARDO V
STREET ADDRESS CORNER CENTRAL & COMMONWEALTH AVENUES
CITY-ST-ZIP DILIMAN, QUEZON CITY, PHILIP 1107

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE S
NAME TUMANAN, ARNEL A
STREET ADDRESS CORNER CENTRAL & COMMONWEALTH AVENUES
CITY-ST-ZIP DILIMAN, QUEZON CITY, PHILIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE T
NAME SURATOS, ERNESTO V
STREET ADDRESS CORNER CENTRAL & COMMONWEALTH AVENUES
CITY-ST-ZIP DILIMAN, QUEZON CITY, PHILIP 1107

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE AD
NAME SANTOS, MANUEL B
STREET ADDRESS 1655 SOUTHGATE AVENUE
CITY-ST-ZIP DALY CITY CA 94015

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ACS
NAME GAMO, ARTHUR V
STREET ADDRESS 1617 SOUTHGATE AVENUE
CITY-ST-ZIP DALY CITY CA 94015

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed; or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE ARTHUR V. GAMO

05 Jan '99 (610) 985-2398

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)