

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 733137

1. Entity 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 94015-2303

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7087109

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VILLANUEVA, FLORANTE S
7066 PRELLIE STREET
JACKSONVILLE FL 32210

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an addressee, with all other like empowered.

SIGNATURE:

ARTHUR V. GAMO REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07 February 2000 650-9852399

Date

Daytime Phone #

CR2E037 (9/99)



DO NOT WRITE IN THIS SPACE