

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 752224

**FILED**  
**Jan 04, 2010**  
**Secretary of State**

**Entity Name:** LOS PENTECOSTALES DE DELTONA, INC.

**Current Principal Place of Business:**

2000 HOWLAND BLVD  
DELTONA, FL 32738 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 390026  
DELTONA, FL 32738 US

**New Mailing Address:**

**FEI Number:** 59-2957316

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SANTOS, ADRIAN  
1890 PIPPER TERRACE  
DELTONA, FL 32738 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: PD  
Name: SANTOS, ADRIAN  
Address: 1890 PIPPER TERRACE  
City-St-Zip: DELTONA, FL 32738 US

Title: V  
Name: SANTOS, BLANCA H  
Address: 1890 PIPPER TERRACE  
City-St-Zip: DELTONA, FL 32738 US

Title: C  
Name: CARIN, REYNALDO  
Address: 1426 RANDOLPH ST  
City-St-Zip: DELTONA, FL 32725 US

Title: C  
Name: RIVERA, NELIDA  
Address: 756 LUDLUM DR  
City-St-Zip: DELTONA, FL 32728 US

Title: D  
Name: MALDONADO, HECTOR  
Address: 503 STALLINGS AVE  
City-St-Zip: DELTONA, FL 32738 US

Title: TS  
Name: MALDONADO, BLANCA  
Address: 503 STALLINGS AVE  
City-St-Zip: DELTONA, FL 32738 US

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.

**SIGNATURE:** BLANCA MALDONADO

TS

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date