## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #765975**

1. Entity Name



FILED Apr 12, 2006 8:00 am Secretary of State 04-12-2006 90100 033 \*\*\*\*61.25

PRIMERA	A IGLESIA BAUTISTA HISPA DRATED							
P O BOX 355 P O		Mailing Address P 0 BOX 355 SYDNEY, FL 33587-7755	O BOX 355		50011142			
2. Principal Place of Business 11732 Sydnaynd. Suite, Apt. #, etc.  3. Ma		3. Mailing Address P. D. BO Suite, Apt. #, etc.	failing Address  P. D · Bo $\chi$ 3.55  Suite, Apt. #, etc.		02242006 Chg-NP CR2E037 (11/05)			
City & State Dover	FU	Sydney, Fu	drey Fo 33587		6		olied For Applicable	
3352	7 Hillsboro ush	33587	Country Hillstown	5. Certificate of Sta	Fea	.75 Addi Required		
	C. Haire and Address of Current F	Name	7. Name and Address of New Registered Agent					
DELGADO, DAVID 1528 SYDNEY DOVER RD DOVER, FL 33527				Street Address (P.O. Box Number is Not Acceptable)				
			City		FL	Zip Code	ļ	
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. I am familiar with, and accept								
the obligations of registered agent.  SIGNATURE Storal Cours Delgado  Signature, typed or printed name of registered agent and the if applicable (NOTE Registered Agent signature required when remediating)  OATE								
	Signature, typed or printed name of registered agent a	ndulfte il applicable (NOTE. Re	gistered Agent signature re	quired when remulating)	DATE			
Filing Fee is \$61.25  Due by May 1, 2006  9. Election Campaign Fir Trust Fund Contribution				\$5.00 May Be Added to Fees	Make check pa Florida Departme	-		
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIREC	TORS IN	10	
TITLE NAME STREET ADDRESS	TR TREJO, MIGUEL 5914 HWY. 92 LOT 1	D Delete	STREET ADDRESS 3	Fabian Tr. 481 Lindse	45treet	Change	action	
CITY-ST-ZIP	PLANT CITY, FL 33567		CITY-ST-ZIP	over, FL 3	7527			
IFILE NAME STREET ADDRESS CITY-ST-ZIP	T DOMINGUEZ, MILDRED 6902 STAFFORD RD PLANT CITY, FL 33565	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Add:tion	
TITLE NAME STREET ADDRESS	TR ESPARZA, WALDO 6704 PEMBERTON VIEW	(Di Delete	TITLE NAME STREET ADDRESS			Change	☐ Addition	
CITY-ST-ZEP	SEFFNER, FL 33584 TR	☐ Daiete	RITLE			Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	DELGADO, ANTONIA 1528 SYDNEY DOVER RD DOVER, FL 33527		NAME SIREET ADDRESS CITY-SI-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR RAMIREZ, FRANCISCA 4721 SILKRUN PLANT CITY, FL 33567	Delete	TITLE NAME STREET ADDRESS CITY-SI-ZEP	1 1 200 40 300 100		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR MELENDEZ, MARTIN 3750 TANNAS RD. DOVER, FL 33527	☐ Delete	TITLE NAME STREET ADDRESS			Change	☐ Addition	
	certify that the information supplied with	11 4 707	CITY-ST-ZIP					

Indicated on this report or supplemental roport is true and accurate and that my signature shall have the same legal effect as if made under ceth; that I am an officer or director of the corporation or the receiver or trustee ampowered 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 address, with all other-like empowered.

GNATURE:

2/26/00 (8/3)759-8458

SIGNATURE AND TYPED OR PROMITED HAME OF SIGNING OFFICER OR DIRECTOR

Date:

Date

SIGNATURE: \_

2/26/00 (813)759-8458 Date Dayleme Phone #