

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765975

FILED
Feb 17, 2009
Secretary of State

Entity Name: PRIMERA IGLESIA BAUTISTA HISPANA DE DOVER, INCORPORATED

Current Principal Place of Business:

14732 SYDNEY RD
DOVER, FL 33527

New Principal Place of Business:

Current Mailing Address:

P O BOX 355
SYDNEY, FL 33587

New Mailing Address:

FEI Number: 59-2443076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DELGADO, DAVID
1528 SYDNEY DOVER RD
DOVER, FL 33527 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: TR () Delete
Name: MANSILLA, AMICAR
Address: 715 JERRYSMITH RD
City-St-Zip: DOVER, FL 33527

Title: T () Delete
Name: MALENDEZ, PAULA
Address: 3750 TANNER RD
City-St-Zip: DOVER, FL 33527

Title: TR () Delete
Name: TREJO, MIGUEL
Address: 5914 US HWY 92 W #2
City-St-Zip: PLANT CITY, FL 33566

Title: TR () Delete
Name: MELENDEZ, MARTIN
Address: 3750 TANNAS RD.
City-St-Zip: DOVER, FL 33527

Title: TR () Delete
Name: VALDEZ, FERNANDO
Address: 5208 GABBY CT #41
City-St-Zip: RIVERVIEW, FL 33568

Title: TR (X) Delete
Name: RODRIQUEZ, DANIEL
Address: 721 JERRY SMITH RD
City-St-Zip: DOVER, FL 33527

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TR (X) Change () Addition
Name: RODRIGUEZ, DANIEL
Address: 5110 CALHOUN RD
City-St-Zip: PLANT CITY, FL 33567

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

Title: TR (X) Change () Addition
Name: TREJO, DIONISIO
Address: P.O. BOX 507
City-St-Zip: SYDNEY, FL 33587

Title: TR (X) Change () Addition
Name: MELENDEZ, MARTIN
Address: 3750 TANNER RD.
City-St-Zip: DOVER, FL 33527

Title: TR (X) Change () Addition
Name: RAMIREZ, GUILLERMO
Address: 4721 SILKRUN
City-St-Zip: PLANT CITY, FL 33567

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: DAVID DELGADO

PAST

02/17/2009

Electronic Signature of Signing Officer or Director

Date