

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90263 027 ****61.25

DOCUMENT # 765975

1. Entity Name

PRIMERA IGLESIA BAPTISTA HISPANA DE DOVER, INCORPORATED



Principal Place of Business

P O BOX 355
SYDNEY, FL 33587-7755

Mailing Address

P O BOX 355
SYDNEY, FL 33587-7755

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 **59-2443076**

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

DELGADO, DAVID
702 INNERGARY PLACE
VALRICO FL 33594

NEW ADDRESS
1528 SYDNEY DOVER RD
DOVER, FL 33527

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

MINISTER

04/13/03

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

(NOTE: Registered Agent signature required when re-registering)

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
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TR** ☒ Delete
NAME **VALDEZ, ALEJANDRO**
STREET ADDRESS **59 K HWY 92 LOT #11**
CITY-ST-ZIP **PLANT CITY FL 33567**

TITLE **TR** ☒ Change ☐ Addition
NAME **MIGUEL TREJO**
STREET ADDRESS **5914 HWY.92 LOT 1**
CITY-ST-ZIP **PLANT CITY, FL 33567**

TITLE **T** ☒ Delete
NAME **VAZQUES, ISRAEL**
STREET ADDRESS **P O BOX 262** N/A
CITY-ST-ZIP **SYDNEY FL 33587**

TITLE **T** ☐ Change ☐ Addition
NAME **FRANCISCA RAMIREZ**
STREET ADDRESS **4721 SILKRUN**
CITY-ST-ZIP **PLANT CITY, FL 33567**

TITLE **TR** ☐ Delete
NAME **ESPARZA, WALDON**
STREET ADDRESS **6704 PEMBERTON VIEW**
CITY-ST-ZIP **SEFFNER FL 33584**

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

TITLE **TR** ☐ Delete
NAME **DELGADO, ANTONIA**
STREET ADDRESS **702 INNERGRAY PLACE**
CITY-ST-ZIP **VALRICO FL 33594**

TITLE **TR** ☐ Change ☐ Addition
NAME **DELGADO, ANTONIA**
STREET ADDRESS **1528 SYDNEY DOVER RD.**
CITY-ST-ZIP **TR DOVER FL 33527**

TITLE **TR** ☒ Delete
NAME **ZAMMARRIPA, IDALISA**
STREET ADDRESS **1640 WAKEFIELD DR.**
CITY-ST-ZIP **BRANDON FL 33511**

TITLE **TR** ☒ Change ☐ Addition
NAME **GUILLERMO RAMIREZ**
STREET ADDRESS **4721 SILKRUN**
CITY-ST-ZIP **PLANT CITY, FL 33567**

TITLE **TR** ☒ Delete
NAME **ZAMMARRIPA, IDALISA**
STREET ADDRESS **1640 WAKEFIELD DR**
CITY-ST-ZIP **BRANDON FL 33511**

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 address, with all other like empowered.

SIGNATURE: *Re David Delgado*

DAVID DELGADO 04/13/03 813-707-9289

CR2E037 (10/02)