## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#767338**

FILED Jan 23, 2009 Secretary of State

Entity Name: IGLESIA EVANGELICA MENONITA ARCAS DE SALVACION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	LINA STREET S, FL 33905			
Current Mailing Address:		New Mailing Addre	New Mailing Address:	
PO BOX 5 FORT MY	0058 ERS, FL 33994	US		
El Number	30-0049956	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:
I4750 HO EHIGH A	ADO, DAVID MESTEAD ROAI CRES, FL 3397 named entity su	1 US	ourpose of changing its register	ed office or registered agent, or both,
	e of Florida.		an pood of changing no regions.	ou omes en regietereu agent, en zeur,
SIGNATUI	RF.			
		Signature of Registered Age	ent	Date
				Date  GES TO OFFICERS AND DIRECTORS
DFFICER: itle: lame: .ddress:	Electronic	DRS: elete VID AD ROAD		
DFFICER: ittle: lame: .ddress: city-St-Zip: ittle: lame: .ddress:	Electronic  S AND DIRECTO  PD () D  MALDONADO, DA  14750 HOMESTE	elete VID AD ROAD FL 33971 elete NDO I ST	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTORS
	PD ()D MALDONADO, DA 14750 HOMESTE LEHIGH ACRES, D ()D PACHECO, ARMA 5400 BERRYMAN	elete VID AD ROAD FL 33971 elete NDO ST FL 33971 elete RTHA A REET	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition
DFFICER: itle: lame: .ddress: city-St-Zip: itle: lame: .ddress: city-St-Zip: itle: lame: .ddress:	Electronic  S AND DIRECTO  PD () D  MALDONADO, DA  14750 HOMESTE  LEHIGH ACRES,  D () D  PACHECO, ARMA  5400 BERRYMAN  LEHIGH ACRES,  T () D  ALAVARADO, BEI  2118 STELLA STI	elete MID AD ROAD FL 33971 elete NDO ST FL 33971 elete RTHA A REET . 33901 elete DRMA E CIRCLE	ADDITIONS/CHANC  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: Address:	GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition  ( ) Change ( ) Addition

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 MALDONADO PD 01/23/2009