

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000741

FILED
May 01, 2009
Secretary of State

Entity Name: SPANISH EASTERN DISTRICT, INC. OF THE CHRISTIAN & MISSIONARY ALLIANCE

Current Principal Place of Business:

3133 CENTRAL AVE., #202
UNION CITY, NJ 07087 US

New Principal Place of Business:

3133 CENTRAL AVE.,
SUITE 202
UNION CITY, NJ 07087 US

Current Mailing Address:

P.O. BOX 865
UNION CITY, NJ 07087

New Mailing Address:

3133 CENTRAL AVE.,
SUITE 202
UNION CITY, NJ 07087 US

FEI Number: 23-2685199 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CUEVAS, JORGE
2409 HATTON CHASE LANE
KISSIMMEE, FL 34746 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: P () Delete
Name: CUEVAS, JORGE
Address: 2409 HATTON CHASE LN
City-St-Zip: KISSIMMEE, FL 34746

Title: S () Delete
Name: BRACEWELL, DEAN
Address: 35 WASHINGTON PL
City-St-Zip: MORRISTOWN, NJ 07960

Title: T () Delete
Name: MORELL, HAZAEL
Address: 257 LOCUST GLEN DR.
City-St-Zip: CRANSTON, RI 02921

Title: D () Delete
Name: CARRASQUILLO, LUIS
Address: 69 RANDOLPH AVE
City-St-Zip: DOVER, NJ 07801

Title: D () Delete
Name: SOLIS, ANDRES
Address: 2601 LULLINGTON DR.
City-St-Zip: WINSTON SALEM, NC 27103

Title: D () Delete
Name: MEDINA, GEORGE
Address: 2215 QUIMBY AVE.
City-St-Zip: BRONX, NY 10473

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JORGE CUEVAS

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date