2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001783

FILED Aug 09, 2006 Secretary of State

Entity Name: LUIS PALAU EVANGELISTIC ASSOCIATION, INC.

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|---|--|--|--|--|
| | 67TH PLACE ON, OR 97006 | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| PO BOX 50 PORTLANI |) D, OR 97207 | | | |
| FEI Number: 93-0713827 FEI Number Applied For() FEI Nur In accordance with s. 607.193(2)(b), F.S., the corporation did not receive to Name and Address of Current Registered Agent: | | - | | |
| | DICARRO | | | |
| LOGUZZO, RICARDO 8585 SUNSET DR. #80 | | LOGUZZO, RICARDO 9200 S DADELAND BLVD #404 | | |
| | | | MIAMI, FL 33156 US | |
| | named entity submits this statement for the purpose of Florida. | of changing i | ts registered office or registered agent, or both, | |
| SIGNATUF | RE: | | 08/09/2006 | |
| | Electronic Signature of Registered Agent | | Date | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | P () Delete PALAU, LUIS 10519 NW LACASSEL CREST LANE PORTLAND, OR 97229 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | VP () Delete PALAU, KEVIN 16750 NW MISSION OAKS DR BEAVERTON, OR 97006 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | VS () Delete JONES, DAVID 1232 NW 175TH PL BEAVERTON, OR 97006 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | D () Delete HALL, DAVID 3800 ELINCOLN DRIVE #3 PHOENIX, AZ 85018 | Title: Name: Address: City-St-Zip: | D (X) Change () Addition HALL, DAVID 3800 E LINCOLN DRIVE #3 PHOENIX, AZ 85018 | |
| Title: Name: Address: City-St-Zip: | D () Delete HORN, GERALD 17 SAINT LAURENT PL DALLAS, TX 75225 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | D () Delete FRIESEN, SAM 11131 SE 57TH ST BELLEVUE, WA 98006 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| | | | | |

I hereby certify that the information supplied with this filing does not qualify for the 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: WALTER BROCKHAUS ACCT 08/09/2006