

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000781

FILED  
Apr 05, 2008  
Secretary of State

Entity Name: MEXICAN CULTURE ORGANIZATION, CORP.

**Current Principal Place of Business:**

207 S SUMMIT ST  
CRESCENT CITY, FL 32112

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 441  
SEVILLE, FL 32190

**New Mailing Address:**

207 S SUMMIT ST  
CRESCENT CITY, FL 32112

FEI Number: 59-3701173

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JAIMES, MAGDALENA  
199 MILLS RD  
DELAND, FL 32724 US

**Name and Address of New Registered Agent:**

JAIMES, MAGDALENA  
207 S SUMMIT ST  
CRESCENT CITY, FL 32112 US

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: MAGDALENA JAIMES

04/05/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GALARZA, MARIA C  
Address: P.O. BOX 904  
City-St-Zip: PIERSON, FL 32180

Title: D ( ) Delete  
Name: JAIMES, APOLONIA  
Address: 271 W DAVIS ST  
City-St-Zip: DELEON SPRINGS, FL 32130

Title: D ( ) Delete  
Name: JAIMES, MAGDALENA  
Address: 199 MILLS RD  
City-St-Zip: DELAND, FL 32724

Title: T ( ) Delete  
Name: JAIMES, ANTONIO  
Address: 121 1/2 WOODLAND BLVD  
City-St-Zip: DELAND, FL 32724

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: P (X) Change ( ) Addition  
Name: JAIMES, MAGDALENA  
Address: 207 S SUMMIT ST  
City-St-Zip: CRESCENT CITY, FL 32112

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: MAGDALENA JAIMES

P

04/05/2008

Electronic Signature of Signing Officer or Director

Date