

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003129

FILED
Apr 30, 2008
Secretary of State

Entity Name: INTERNATIONAL MISSIONARY COMMISSION "THE NARROW DOOR" INC.

Current Principal Place of Business:

7300 VIALE SONATA
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

7300 VIALE SONATA
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 65-1006653 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

VALLE, NARCISO A
7300 VIALE SONATA
LAKE WORTH, FL 33467 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: PD () Delete
Name: VALLE, NARCISO A
Address: 7300 VIALE SONATA
City-St-Zip: LAKE WORTH, FL 33467 US

Title: VD () Delete
Name: VALLE, SORAYA
Address: 7300 VIALE SONATA
City-St-Zip: LAKE WORTH, FL 33467 US

Title: TD () Delete
Name: MOLINA, DAVID
Address: 9286 SW 5TH STREET
City-St-Zip: BOCA RATON, FL 33428

Title: M () Delete
Name: MOLINA, MARITZA
Address: 9286 SW 5TH STREET
City-St-Zip: BOCA RATON, FL 33428

Title: SD () Delete
Name: CONTRERAS, MARIA
Address: 5906 HYPOLUXO ROAD
City-St-Zip: LAKE WORTH, FL 33463

Title: M () Delete
Name: CONTRERAS, JUAN
Address: 5906 HYPOLUXO ROAD
City-St-Zip: LAKE WORTH, FL 33463

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
Name:
Address:
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: NARCISO A VALLE

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date