

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003467

FILED  
Jun 06, 2005  
Secretary of State

Entity Name: LUIS ROSA EVANGELISTIC ASSOCIATION, INC.

**Current Principal Place of Business:**

1633 E. VINE STREET, SUITE 107  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 453537  
KISSIMMEE, FL 347453537

**New Mailing Address:**

FEI Number: 58-4709961      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

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

ROSA, LUIS  
1633 E. VINE STREET, SUITE 107  
KISSIMMEE, FL 34744      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: ROSA, LUIS  
Address: 420 CARDINAL COURT  
City-St-Zip: KISSIMMEE, FL 34759

Title: VD      ( ) Delete  
Name: CEVALLOS, RICHARD  
Address: 1152 PERPIGNAN COURT  
City-St-Zip: KISSIMMEE, FL 34759

Title: TD      ( ) Delete  
Name: SANTIAGO, JESUS  
Address: 1100 CARRIE LN.  
City-St-Zip: KISSIMMEE, FL 34741

Title: SD      ( ) Delete  
Name: CURRAS, FERNANDO  
Address: 240 WHITE RAPIDS LANE  
City-St-Zip: ORLANDO, FL 32828

Title: D      ( ) Delete  
Name: HERNANDEZ, ENRIQUE  
Address: 2848 FALLEN TREE COURT  
City-St-Zip: ORLANDO, FL 32837

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUIS ROSA

P

06/06/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date