

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003917

FILED  
Mar 18, 2012  
Secretary of State

**Entity Name:** IGLESIA PENTECOSTAL GETSEMANI DE NAPLES, INC.

**Current Principal Place of Business:**

4148 CORPORATE SQUARE BLVD  
UNIT B  
NAPLES, FL 34104

**New Principal Place of Business:**

2940 S. HORSESHOE DR.  
SUITE 1000  
NAPLES, FL 34104

**Current Mailing Address:**

784 HAMPTON CIRCLE  
NAPLES, FL 34105

**New Mailing Address:**

FEI Number: 22-3738677      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ROSARIO, FRANCISCO JR.  
784 HAMPTON CIRCLE  
NAPLES, FL 34105      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  
Name: ROSARIO, FRANCISCO JR  
Address: 784 HAMPTON CIRCLE  
City-St-Zip: NAPLES, FL 34105

Title: TD  
Name: DIAZ, ROSEMARY  
Address: 3102 VASSALLO AVE.  
City-St-Zip: LAKEWORTH, FL 33461

Title: SD  
Name: ROSARIO, YOLANDA C  
Address: 784 HAMPTON CIRCLE  
City-St-Zip: NAPLES, FL 34105

Title: OD  
Name: PALACIOS, DIONISIA  
Address: 2425 JAMES ROAD  
City-St-Zip: NAPLES, FL 34114

Title: OD  
Name: URRUTIA DE CAZARES, ROSA C  
Address: 12 SALINAS DR.  
City-St-Zip: NAPLES, FL 34114

I hereby 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 all other like empowered.

SIGNATURE: FRANCISCO ROSARIO

PD

03/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date