

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 01, 2008 08:00 AM
Secretary of State

DOCUMENT # N00000006417	
1. Entity Name CHURCH OF THE NAME OF THE LORD JESUS CHRIST, INC.	

Principal Place of Business 130 TULIP TREE DR LANTANA FL 33462	Mailing Address 130 TULIP TREE DR LANTANA FL 33462
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE	CR2E037 (10/07)
4. FEI Number 65-1126482	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RIVERA, NESTOR L 130 TULIP TREE DR LANTANA FL 33462	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent	
SIGNATURE _____ Signature typed or printed name of registered agent and title (and address)	DATE _____ (NOTE: Registered Agent signature is required with statement)

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT RODRIGUEZ, JUAN 3675 NE 15TH AVE POMPANO BEACH FL 33064 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RODRIGUEZ, KAREN 3675 NE 15TH AVE POMPANO BEACH FL 33064 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIVERA, NESTOR L 130 TULIP TREE DR LANTANA FL 33462 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VALDERRAMA, RAFAEL 1113 SW 9TH AVE DELRAY BEACH FL 33444 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAMORRO, MANUEL 3080 NE 5TH AVENUE POMPANO BEACH FL 33064 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
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SIGNATURE: Nestor Luis Rivera 1-30-08 561-540-3689