

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000003606

1. Entity Name

NUESTRA IGLESIA EN LA ROCA, INC.

Principal Place of Business

Mailing Address

3023 PROCTOR RD  
SARASOTA FL 34231

3023 PROCTOR RD  
SARASOTA FL 34231

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1117838

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASTILLO, DAVID  
3023 PROCTOR RD  
SARASOTA FL 34231

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,  
min. will be \$236.25.

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete  
NAME Director  
STREET ADDRESS David Castillo  
CITY-ST-ZIP 3290 maiden Ln  
Sarasota FL 34231

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME Director  
STREET ADDRESS Richard L. Brantley  
CITY-ST-ZIP 4137 King Richard Drive  
Sarasota FL 34232

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME Director  
STREET ADDRESS Dina Sizemore  
CITY-ST-ZIP 4021 Chesnut ave  
Sarasota FL 34234

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME Director  
STREET ADDRESS Alexis Labanino  
CITY-ST-ZIP 3024 Hawthorne St.  
Sarasota FL 34239

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 to this address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-31-02 / 941-9251992

Date

Daytime Phone #

FILED  
Aug 19, 2002 8:00 am  
Secretary of State

08-06-2002 90142 002 \*\*\*\*\*8.75

08-06-2002 90142 001 \*\*\*\*\*61.25

41685



DO NOT WRITE IN THIS SPACE

CR2E037 (4/02)