

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003795

FILED  
Mar 24, 2012  
Secretary of State

**Entity Name:** IGLESIA EVANGELICA EL TABOR DE INTERCESSION CITY, INC.

**Current Principal Place of Business:**

5621 ORANGE AVENUE  
INTERSECCION CITY, FL 33848 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 502  
INTERSECCION CITY, FL 33848 US

**New Mailing Address:**

**FEI Number:** 59-3732282

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TORRES, JUAN  
2203 GATWICH CT.  
KISSIMMEE, FL 34743 US

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

DEL VALLE, JOSE R  
1028 GRAND RESERVE DRIVE  
DAVENPORT, FL 33837 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: JOSE R. DEL VALLE

03/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RIVERA, SARA I  
Address: P.O. BOX 502  
City-St-Zip: INTERSECCION CITY, FL 33848 US

Title: SD  
Name: GUADALUPE, SAUL  
Address: P.O. BOX 502  
City-St-Zip: INTERSECCION CITY, FL 33848 US

Title: VP  
Name: TORRES, JUAN  
Address: P.O. BOX 502  
City-St-Zip: INTERSECCION CITY, FL 33848 US

Title: T  
Name: DEL VALLE, JOSE R  
Address: P.O. BOX 502  
City-St-Zip: INTERSECCION CITY, FL 33848 US

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: SARA L RIVERA

P

03/24/2012

Electronic Signature of Signing Officer or Director

Date