

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003958

FILED  
Apr 09, 2009  
Secretary of State

**Entity Name:** IGLESIA DE CRISTO EN OKEECHOBEE, INC.

**Current Principal Place of Business:**

506 N.E. 6TH AVENUE  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

**Current Mailing Address:**

1525 NE 64TH DRIVE  
OKEECHOBEE, FL 34972

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

ZEPEDA, OCTAVIO  
6695 NE 10TH LANE  
OKEECHOBEE, FL 34974    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: P                      ( ) Delete  
Name: ZEPEDA, OCTAVIO  
Address: 6695 NE 10TH LANE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: VP                      ( ) Delete  
Name: MORAN, MARSELINO  
Address: 6695 NE 10TH LANE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: TD                      ( ) Delete  
Name: CASTILLO, RICARDO  
Address: 1525 NE 64 DRIVE  
City-St-Zip: OKEECHOBEE, FL 34972

**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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RICARDO CASTILLO

TD

04/09/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date