

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2006 08:00 AM
Secretary of State

DOCUMENT # N01000004213

1. Entity Name
**PRIMERA IGLESIA HISPANA BAUTISTA LIBRE DE WEST
PALM BEACH, INC.**



Principal Place of Business
**1065 JCG RD
WEST PALM BEACH, FL 33415**

Mailing Address
**815 N F STREET
LAKE WORTH, FL 33460**



03222006 No Chg-NP

CRZE037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1151147

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SANCHO, ANDRES
3496 LYNWOOD DRIVE APT #9
LAKE WORTH, FL 33461**

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2006**

**9. Election Campaign Financing
Trust Fund Contribution.** ☐

**\$5.00 May Be
Added to Fees**

U00000483489

04/11/06-80123-023 61.25

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SANCHO, ANDRES
STREET ADDRESS 3496 LYNWOOD DRIVE #9
CITY-ST-ZIP LAKE WORTH, FL 33461

TITLE SD
NAME CASTILLO, JUAN
STREET ADDRESS 815 N F ST
CITY-ST-ZIP LAKE WORTH, FL 33460

TITLE TD
NAME CASTILLO, PASTORA
STREET ADDRESS 815 N F STREET
CITY-ST-ZIP LAKE WORTH, FL 33460

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: **ANDRES SANCHO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/22/06 (561) 9678601
Date Daytime Phone #