

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000367

FILED  
Jul 08, 2008  
Secretary of State

**Entity Name:** IGLESIA DE DIOS FUENTE DE REDENCION, INC.

**Current Principal Place of Business:**

1507 W SLIGH AVE.  
TAMPA, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 9333  
TAMPA, FL 336749333

**New Mailing Address:**

**FEI Number:** 91-1895978      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PEREZ, JOSE A  
10921 BRIGHTSIDE DR  
TAMPA, FL 33624 US

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

ACEVEDO, TOMAS  
8463 ADELE RD  
LAKELAND, FL 33810 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: TOMAS ACEVEDO

07/08/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ACEVEDO, TOMAS  
Address: 1507 W SLIGHT AVE  
City-St-Zip: TAMPA, FL 33674

Title: T ( ) Delete  
Name: RIVERA, LUIS A  
Address: 4512 W. HANNA  
City-St-Zip: TAMPA, FL 33614

Title: T ( ) Delete  
Name: ESPINOSA, ZORAIDA  
Address: 10804 WINGATE DR.  
City-St-Zip: TAMPA, FL 33624

Title: T (X) Delete  
Name: PEREZ, ADRIAN  
Address: 17332 MINT LEAF LANE  
City-St-Zip: LAND O' LAKES, FL 34639

Title: T/S (X) Delete  
Name: MONTALVO, CARMILA  
Address: 7008 PONDEROSA DR  
City-St-Zip: TAMPA, FL 33617

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ACEVEDO, TOMAS  
Address: 8463 ADELE RD  
City-St-Zip: LAKELAND, FL 33810

Title: T (X) Change ( ) Addition  
Name: GONZALEZ, JULIO R  
Address: 3124 DONINGTON CASTLE LN  
City-St-Zip: LAND O LAKES, FL 34638

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: TOMAS ACEVEDO

P

07/08/2008

Electronic Signature of Signing Officer or Director

Date