

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 24, 2008
Secretary of State**

DOCUMENT# N02000001796

Entity Name: IGLESIA NUEVA VIDA DE ORLANDO, INC.

Current Principal Place of Business:

3420 CIRQUE CIRCLE
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

3420 CIRQUE CIRCLE
ORLANDO, FL 32817

New Mailing Address:

FEI Number: 01-0571444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVILA, RAMON REV.
3420 CIRQUE CIRCLE
ORLANDO, FL 32817 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: PD () Delete
Name: DAVILA, RAMON REV.
Address: 3420 CIRQUE CIRCLE
City-St-Zip: ORLANDO, FL 32817

Title: TD () Delete
Name: SANTIAGO, ALIDA MRS.
Address: 3420 CIRQUE CIRCLE
City-St-Zip: ORLANDO, FL 32817

Title: SD (X) Delete
Name: DAVILA, THELMA MRS.
Address: 3420 CIRQUE CIRCLE
City-St-Zip: ORLANDO, FL 32817

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: RAMON DAVILA

PD

04/24/2008

Electronic Signature of Signing Officer or Director

_____ Date