

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002381

FILED
Sep 07, 2006
Secretary of State

Entity Name: IGLESIA; BANDERA DE CRISTO, INC.

Current Principal Place of Business:

621 RIDGE DR.
NAPLES, FL 34108

New Principal Place of Business:

Current Mailing Address:

1636 COVINGTON MEADOW
LEHIGH ACRES, FL 33936

New Mailing Address:

FEI Number: 01-0641407 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

GARMAN, GUY
4747 HOLLYWOOD BLVD., #274
HOLLYWOOD, FL 33021 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: D () Delete
Name: ORTIZ, JOEL
Address: 1636 COVINGTON MEADOW CR.
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D () Delete
Name: SARABIA, CARLOS
Address: 97 ISLES OF ST. THOMAS ST.
City-St-Zip: NAPLES, FL 34114

Title: D () Delete
Name: ORTIZ, ROSA
Address: 1636 COVINGTON MEADOW CR.
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D () Delete
Name: GOMEZ, MEFIBOSEP
Address: 11370 ORANGE BLOSSOM DR.
City-St-Zip: BONITA, FL 34135

Title: D () Delete
Name: CORRODERO, EVA
Address: 6490 COLLEGE PARK CIRCLE #105
City-St-Zip: NAPLES, FL 34113

Title: D () Delete
Name: TORRES, ANTONIA
Address: 6490 COLLEGE PARK CIRCLE 3201
City-St-Zip: NAPLES, FL 34113

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CARRADERO, EVA
Address: 6490 COLLEGE PARK CIRCLE #105
City-St-Zip: NAPLES, FL 34113

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: EVA CARRADERO-ORTIZ

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09/07/2006

Electronic Signature of Signing Officer or Director

Date