

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002381

FILED
Feb 22, 2009
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:

PO BOX 249
LEHIGH ACRES, FL 33970

New Mailing Address:

FEI Number: 01-0641407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

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: HAGINS, ELENIA
Address: 207 DALEVIEW AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D () Delete
Name: ORTIZ, ZULY
Address: 625 3RD TERRACE
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ORTIZ, JOEL
Address: 13463 HAMPTON PARK COURT
City-St-Zip: FORT MYERS, FL 33913

Title: D (X) Change () Addition
Name: SARABIA, CARLOS
Address: 1609 COVINGTON MEADOW CIRCLE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D (X) Change () Addition
Name: ORTIZ, ROSA
Address: 13463 HAMPTON PARK COURT
City-St-Zip: FORT MYERS, FL 33913

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: ELENIA HAGINS

D

02/22/2009

Electronic Signature of Signing Officer or Director

Date