

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005549

FILED  
May 26, 2008  
Secretary of State

**Entity Name:** PALABRA VIVA Y EFICAZ CHRISTIAN CHURCH, INC.

**Current Principal Place of Business:**

11349 ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

2626 GINVER MILL BLVD.  
ORLANDO, FL 32837

**New Mailing Address:**

**FEI Number:** 51-0419131      **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:**

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

FANDINO, JUAN  
2409 BARLEY CLUB DR #4  
ORLANDO, FL 32837 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FANDINO, JUAN PASTOR  
Address: 2409 BARLEY CLUB DR #4  
City-St-Zip: ORLANDO, FL 32837

Title: DS ( ) Delete  
Name: FANDINO, GILMA  
Address: 2409 BARLEY CLUB DR #4  
City-St-Zip: ORLANDO, FL 32837

Title: DT ( ) Delete  
Name: CRUZ, CRISTINA  
Address: 2409 BARLEY CLUB DR #4  
City-St-Zip: ORLANDO, FL 32837

**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: JUAN FANDINO

D

05/26/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date