


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2005 8:00 am
Secretary of State

03-29-2005 90013 044 ****61.25

DOCUMENT # N03000001936

1. Entity Name
IGLESIA DE CRISTO BELEN INC.



Principal Place of Business
**2270 GRIFFIN ROAD
 WAUCHULA, FL 33873**

Mailing Address
**PO BOX 842
 BOWLING GREEN, FL 33834**

2. Principal Place of Business
2126 Alamo Ave.
 Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 842
 Suite, Apt. #, etc.

City & State
Wauchula, FL

City & State
Bowling Green, FL

Zip
33873

Country
USA

Zip
33834

Country
USA



02102005 Chg-NP CR2E037 (10/03)

4. FEI Number **56-2324620** Applied For
 APPLIED FOR Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**MORAN, LEONARDO
 2270 GRIFFIN ROAD
 WAUCHULA, FL 33873**

7. Name and Address of New Registered Agent
 Name **Leonardo Moran**
 Street Address (P.O. Box Number is Not Acceptable)
1862 Smith Rd
 City **Wauchula** FL Zip Code **33873**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: **Leonardo Moran S.**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is **\$61.25** Due by **May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to **Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P	<input type="checkbox"/> Delete MORAN, LEONARDO 2270 GRIFFIN RD. WAUCHULA, FL 33873	TITLE CO-PASTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Miguel Reyes 802 N. Cleveland FL Meade, FL 33841
TITLE SEC	<input type="checkbox"/> Delete MORAN, LINDA 2270 GRIFFIN RD WAUCHULA, FL 33873	TITLE SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Luis Lopez 1910 Stanfield Wauchula, FL 33873
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Linda J Moran**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **3-8-05** Daytime Phone # **(863) 773-5023**