

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001936

FILED
May 22, 2009
Secretary of State

Entity Name: IGLESIA DE CRISTO BELEN INC.

Current Principal Place of Business:

2126 ALAMO AVE
WAUCHULA, FL 33873

New Principal Place of Business:

Current Mailing Address:

PO BOX 842
BOWLING GREEN, FL 33834

New Mailing Address:

FEI Number: 56-2324620 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:

MORAN, LEONARDO
1862 SMITH RD
WAUCHULA, FL 33873 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: P () Delete
Name: MORAN, LEONARDO
Address: 2270 GRIFFIN RD.
City-St-Zip: WAUCHULA, FL 33873

Title: SEC () Delete
Name: MORAN, LINDA
Address: 2270 GRIFFIN RD
City-St-Zip: WAUCHULA, FL 33873

Title: CP () Delete
Name: REYES, MIGUEL
Address: 802 N CLEVELAND
City-St-Zip: FORT MEADE, FL 33841

Title: S () Delete
Name: LOPEZ, LUIS
Address: 1910 STANFIELD
City-St-Zip: WAUCHULA, FL 33873

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:

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: LEONARDO MORAN

P

05/22/2009

Electronic Signature of Signing Officer or Director

_____ Date