# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jun 19, 2009**
**Secretary of State**

DOCUMENT# N03000003924

**Entity Name:** IGLESIA DE DIOS REFUGIO ETERNO IN ORLANDO, INC.

**Current Principal Place of Business:**

2042 FORSYTH RD
D
ORLANDO, FL 32807

**New Principal Place of Business:**

2042 N FORSYTH RD
# D
ORLANDO, FL 32807

**Current Mailing Address:**

PO BOX 780422
ORLANDO, FL 32878

**New Mailing Address:**

PO,BOX 780422
ORLANDO FL, 32807, FL 32878

**FEI Number: 55-0830000** **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:**

CAEZ, JOSE M
16961 CORNERWOOD DR
ORLANDO, FL 32820 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: PD ( ) Delete
Name: CAEZ, JOSE M
Address: 16961 CORNERWOOD DR
City-St-Zip: ORLANDO, FL 32820

Title: TD ( ) Delete
Name: MEDINA, LEONOR
Address: 1525 REAVE REACH DR APT 207
City-St-Zip: ORLANDO, FL 32828

Title: D ( ) Delete
Name: BERMUDEZ, MARIA
Address: 1603 REAVE REACH DR APT 121
City-St-Zip: ORLANDO, FL 32828

Title: D ( ) Delete
Name: RAMOS, ELIZABETH
Address: 12969 MALLORY CIRCLET APT 101
City-St-Zip: ORLANDO, FL 32828

Title: D ( ) Delete
Name: RAMOS, JOSE L
Address: 12969 MALLORY CIRCLET APT 101
City-St-Zip: ORLANDO, FL 32828

**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: ( ) 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: JOSE M CAEZ PD 06/19/2009
Electronic Signature of Signing Officer or Director Date