2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000006106 1. Entity Name IGLESIA MANANTIAL SANTO, INC.



FILED
Jan 31, 2005 8:00 am
Secretary of State
01-31-2005 90049 036 ***150.00

Principal Plac 1256 Jann N SO BERMAUI KISSIMMEE, I	YOUNG PKWY D PKY PLAZA	Mailing Address 3407 PALMER DR KISSIMMEE, FL 3474	——————————————————————————————————————			4 V U V O O O O O O O O O O O O O O O O O					
2. Principal Place of Business 1256 John Young Pkwy Stite Apt # 519											
Suite, Apt.	#, etc. ifoux Plaza	Suite, Apt. #, etc.	Suite, Apt. #, etc.			01192005	Chg-NP	CR2E	(10/03)		
City & State	immee Fl.	City & State	City & State			4. FEI Number 02-0696356				oplied For ot Applicable	
3474		Zip	Country	у	5	6. Certificate	of Status Desire	d 🗆	\$8.75 Add Fee Require		
 -	6. Name and Address of Current F	Registered Agent		Name	7	. Name and	Address of Ne	w Registere	d Agent		
SERRANO, ELIVT 3407 PALMER DR KISSIMMEE, FL 34741					Street Address (P.O. Box Number is Not Acceptable)						
				City				F	L Zip Cod	e	
8. The above	named entity submits this statement for	the purpose of changing i	its registered (office or	registered	agent, or both	h, in the State o	f Florida. I a	m familiar with,	and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algneture required when reinstating) DATE											
	Filing Fee is \$61.25 Due by May 1, 2005		lection Campaign Financing rust Fund Contribution.		□ \$:	5.00 May Bo	e F	Make check payable to Florida Department of State			
10.	OFFICERS AND DIR	ECTORS	11.		ADI	DITIONS/CHA	ANGES TO OFF	ICERS AND	DIRECTORS IN	J 10	
NAME STREET ADDRESS CITY-ST-ZIP	PAS Delete SERRANO, ELIVT 3407 PALMER DR KISSIMMEE, FL 34741		TITLE NAME STREET A CITY-ST-	- 1					☐ Change	Addition	
TITLE	S	Delete	TITLE		S				☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	RIOS, ANGIE 952 DELANO GT KISSIMMEE, EL 34758		NAME STREET A CITY-ST-	ADDRESS .	Elisai 3407 Kiss	cl Se Palme Immoe	FLRAN	D 241			
TITLE NAME	T SERRANO, MARRTHA	Delete	TITLE NAME	-	, , , , , , , , , , , , , , , , , , ,	Immo C			☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	3407 PALMER DR KISSIMMEE, FL 34741		STREET A								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>.</u>	☐ Delete	TITLE NAME STREET A CITY-ST-						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A CITY-ST-		•				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A						☐ Change	Addition	
	certify that the information supplied with	.L.:- (1):	f	414-4		440.07(0)() [[]:	11 1	477 -11 1		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #