

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008455

FILED  
Feb 07, 2008  
Secretary of State

**Entity Name:** IGLESIA JESUCRISTO EL LIBERTADOR, INC.

**Current Principal Place of Business:**

101 W CYPRESS ST  
SUITES N&O  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

1499 JOHN YOUNG PKWY  
KISSIMMEE, FL 34741

**Current Mailing Address:**

726 HACIENDA CIR  
KISSIMMEE, FL 34741

**New Mailing Address:**

**FEI Number:** 01-0809767

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUADALUPE, RUTH Z  
726 HACIENDA CIR  
KISSIMMEE, FL 34741 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: DPT ( ) Delete  
Name: GUADALUPE, RUTH Z  
Address: 726 HACIENDA CIR  
City-St-Zip: KISSIMMEE, FL 34741

Title: DPT ( ) Delete  
Name: COLON, EDWIN  
Address: 726 HACIENDA CIR  
City-St-Zip: KISSIMMEE, FL 34741

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DPT (X) Change ( ) Addition  
Name: GONZALEZ, ANGEL  
Address: 571 FLORAL DR.  
City-St-Zip: KISSIMMEE, FL 34743

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: RUTH Z. GUADALUPE

DPT

02/07/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date