

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED**  
**Sep 07, 2007**  
**Secretary of State**

DOCUMENT# N03000008876

**Entity Name:** IGLESIA EVANGELICA EL DIVINO REDENTOR, CORP

**Current Principal Place of Business:**

15798 S.W. WARFIELD BLVD  
INDIANTOWN, FL 34956

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 301  
INDIANTOWN, FL 34956

**New Mailing Address:**

**FEI Number:** 04-3777511      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SIMON, DANIEL  
5819 SO. 37TH ST.  
GREENACRES, FL 334633212 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: MENDOZA ORTIZ, ANDRES  
Address: 4394 SW RANCH WOOD ST  
City-St-Zip: PALM CITY, FL 34990

Title: VD ( ) Delete  
Name: SIMON, ROBERTO R  
Address: 5819 SO 37TH STREET  
City-St-Zip: GREENACRES, FL 334633212

Title: SD (X) Delete  
Name: MENDOZA, BENJAMIN  
Address: 15053 FW 171 STREET DRIVE  
City-St-Zip: INDIANTOWN, FL 34956

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

Title: PD (X) Change ( ) Addition  
Name: SIMON, DANIEL  
Address: 5819 SO. 37TH ST.  
City-St-Zip: GREENACRES, FL 33463

Title: VD (X) Change ( ) Addition  
Name: MENDEZ, FRANCISCO  
Address: 2837 SE IRONTON AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: DANIEL SIMON

PD

09/07/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date