

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001009

FILED  
Jan 16, 2012  
Secretary of State

**Entity Name:** IGLESIA EPISCOPAL JESUS DE NAZARET, INC.

**Current Principal Place of Business:**

26 WILLOW DR  
ORLANDO, FL 32807

**New Principal Place of Business:**

**Current Mailing Address:**

26 WILLOW DR  
ORLANDO, FL 32807

**New Mailing Address:**

**FEI Number:** 20-0764997

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DIOCESE OF CENTRAL FLORIDA, INC.  
1017 EAST ROBINSON ST.  
ORLANDO, FL 32801 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  
Name: RUBIANO, RAUL  
Address: 6627 PICCADILLY LN  
City-St-Zip: ORLANDO, FL 32835

Title: VP  
Name: MALESPIN, MILTON  
Address: 14139 COLONIAL GRAND BLVD. 1505  
City-St-Zip: ORLANDO, FL 32837

Title: T  
Name: SANCHEZ, ZENEYDA  
Address: 2620 TALOVA DR.  
City-St-Zip: ORLANDO, FL 32837

Title: S  
Name: LOPEZ, CUQUI  
Address: 601 ROMANO AVE  
City-St-Zip: ORLANDO, FL 32807

Title: D  
Name: CORDERO, LUCIA  
Address: 152 CERVIDAE DR  
City-St-Zip: APOPKA, FL 32807

Title: D  
Name: RAMIREZ, NIVIA  
Address: 160 SAN BLAS AVE  
City-St-Zip: KISSIMMEE, FL 34743

I hereby 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 all other like empowered.

SIGNATURE: RAUL RUBIANO

P

01/16/2012

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

\_\_\_\_\_  
Date