# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 16, 2009**
**Secretary of State**

DOCUMENT# N04000001471

**Entity Name:** MINISTERIO APOSTOLICO AVANCE MISIONERO, INC.

**Current Principal Place of Business:**

9745 TOUCHTON ROAD
STE. 502
JACKSONVILLE, FL 32246 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 17896
JACKSONVILLE, FL 32245 US

**New Mailing Address:**

9745 TOUCHTON ROAD
STE. 502
JACKSONVILLE, FL 32246 US

**FEI Number: 20-0723479** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

ASENCIO, TONY
9745 TOUCHTON RD. 503
JACKSONVILLE, FL 32246 US

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

ASENCIO, TONY
9745 TOUCHTON RD. 502
JACKSONVILLE, FL 32246 US

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: TONY ASENCIO 04/16/2009
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete
Name: FUNES, ALEX
Address: 9745 TOUCHTONE ROAD
City-St-Zip: JACKSONVILLE, FL 33246 US

Title: AP ( ) Delete
Name: ASENCIO, TONY
Address: 9745 TOUCHTONE ROAD
City-St-Zip: JACKSONVILLE, FL 33246 US

Title: VP ( ) Delete
Name: FUNES, ROSA Q
Address: 9745 TOUCHTONE ROAD
City-St-Zip: JACKSONVILLE, FL 33246

Title: T ( ) Delete
Name: MARTINEZ, JOSE
Address: 2760 CAVENDER CT
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete
Name: MEDINA, ORLANDO
Address: 9745 TOUCHTONE ROAD
City-St-Zip: JACKSONVILLE, FL 33246

Title: S ( ) Delete
Name: MARINEZ, JORGE
Address: 2764 CAVENDER CT
City-St-Zip: JACKSONVILLE, FL 32216

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

Title: PRES (X) Change ( ) Addition
Name: FUNES, ALEX
Address: 9745 TOUCHTONE ROAD, UNIT 502
City-St-Zip: JACKSONVILLE, FL 33246 US

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: TONY ASENCIO PRES 04/16/2009
Electronic Signature of Signing Officer or Director Date