2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 02, 2008 8:00 am Secretary of State DOCUMENT # N04000001723 04-02-2008 90018 004 ****61.25 HISPANIC CHURCH OF GOD, INC. Mailing Address Principal Place of Business 116 TAFT ST LAKE WALES FL 33859 116 TAFT ST LAKE WALES FL 33859 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 06-1717993 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PODRIGUEZ, RUBEN R Street Address (P.O. Box Number is Not Acceptable) 116 TAFT ST LAKE WALES FL 33859 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2008_ Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Change TITLE C Addition ☐ Delete RODRIGUEZ, RUBEN R Elha Gonzalez NAME NAME 116 TAFT ST 2519 HWY 98 E. STREET ADDRESS STREET ADDRESS LAKE WALES FL 33859 Fort Meade, FL 33841 Youth Paster CITY-ST-ZIP CITY-ST-ZIP Delete Addition Luis Gabriel Rivera RODRIGUEZ, JOSEFINA R NAME NAME 116 TAFT ST 119 Taft St. STREET ADDRESS STREET ADDRESS Lake Wales, FL 33859 LAKE WALES FL 33859 CITY-ST-7P CITY-ST-7IP Children's Leader Linda R. Rivera TILE Change Notition Addition TITLE ☐ Delete MARTINEZ, JOANA NAME NAME PO BOX 1665 STREET ADDRESS STREET ADDRESS 119 Taft St. CITY-ST-ZIP BARTOW FL 33831 CITY-ST-ZIP ake Wales, FL 33859 ☐ Change Delete ☐ Addition TITLE TITLE RODRIGUEZ, LINDA R NAME NAME STREET ADDRESS 116 TAFT ST. STREET ACCRESS LAKE WALES FL 33859 CITY-ST-7iP CITY-ST-ZIP TITLE ☐ Delete MILE ☐ Change Addition VELAZQUEZ, RUBEN NAME NAME POB 105 STREET AUDRESS STREET ADDRESS FORT MEADE FL 33841 CITY-ST-ZIP CITY-ST-ZIP THILE ☐ Delete TITLE ☐ Change ☐ Addition VELAZQUEZ, MARIA CRISTINA NAME NAME PO BOX 105 STREET ADDRESS STREET ADDRESS FORT MEADE FL 33841 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information 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 private tike empowered.

SIGNATURE:

3/3/08 863-638:1276

FILED