

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001723

FILED
Apr 27, 2009
Secretary of State

Entity Name: HISPANIC CHURCH OF GOD, INC.

Current Principal Place of Business:

116 TAFT ST
LAKE WALES, FL 33859

New Principal Place of Business:

Current Mailing Address:

116 TAFT ST
LAKE WALES, FL 33859

New Mailing Address:

FEI Number: 06-1717993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, RUBEN R
116 TAFT ST
LAKE WALES, FL 33859 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: T () Delete
Name: GONZALEZ, ELBA
Address: 2519 HWY 98 E.
City-St-Zip: FORT MEADE, FL 33841

Title: VP () Delete
Name: RODRIGUEZ, JOSEFINA R
Address: 116 TAFT ST
City-St-Zip: LAKE WALES, FL 33859

Title: T (X) Delete
Name: MARTINEZ, JOANA
Address: 4007 DIETZ ROAD
City-St-Zip: BARTOW, FL 33831

Title: YP () Delete
Name: RIVERA, LUIS G
Address: 118 TUFT ST.
City-St-Zip: LAKE WALES, FL 33859

Title: APD () Delete
Name: VELAZQUEZ, RUBEN
Address: 505 SEMINOLE COURT
City-St-Zip: FORT MEADE, FL 33841

Title: M () Delete
Name: VELAZQUEZ, MARIA CRISTINA
Address: 505 SEMINOLE COURT
City-St-Zip: FORT MEADE, FL 33841

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: RIVERA, LINDA R
Address: 119 TAFT ST.
City-St-Zip: LAKE WALES, FL 33859

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

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

Title: YP (X) Change () Addition
Name: RIVERA, LUIS G
Address: 119 TAFT ST.
City-St-Zip: LAKE WALES, FL 33859

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: LINDA R. RIVERA

S

04/27/2009

Electronic Signature of Signing Officer or Director

Date