

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003129

FILED
Feb 13, 2008
Secretary of State

Entity Name: ASOCIACION PASTORAL DE MINISTROS HISPANOS DEL CONDADO DE PINELLAS Y CIUDADES ADYACENTES, INC.

Current Principal Place of Business:

9025 49TH ST
PINELLAS PARK, FL 33782

New Principal Place of Business:

Current Mailing Address:

9025 49TH ST
PINELLAS PARK, FL 33782

New Mailing Address:

FEI Number: 20-3429849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDINA, JOSE A
4088 EVERETT AVE
SPRING HILL, FL 34609 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 () Delete
Name: MEDINA, JOSE A P
Address: 4088 EVERETT AVE
City-St-Zip: SPRING HILL, FL 34609

Title: V () Delete
Name: PEREZ, FELIX
Address: 9156 SUNCREST BLVD
City-St-Zip: CLEARWATER, FL 33777

Title: S () Delete
Name: SECUNDINO, MOISES
Address: 1446 BYRAM DR
City-St-Zip: CLEARWATER, FL 33755

Title: T () Delete
Name: VIZCAY, PABLO
Address: 6881 59TH WAY
City-St-Zip: PINELLAS PARK, FL 33781

Title: D () Delete
Name: MORALES, RAMON
Address: 415 MARJON AVE
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: RAMOS, VICTOR
Address: 3400 74TH AVE
City-St-Zip: PINELLAS PARK, FL 33791

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: T (X) Change () Addition
Name: VIZCAY, PABLO
Address: 5966 WILLOWS BRIDGE LOOP
City-St-Zip: ELLENTON, FL 34222

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: PABLO D. VIZCAY

T

02/13/2008

Electronic Signature of Signing Officer or Director

Date