

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003886

FILED
Mar 16, 2009
Secretary of State

Entity Name: IGLESIA DE DIOS GETSEMANI INC

Current Principal Place of Business:

14400 PINE BRIDGE RUN.
ORLANDO, FL 32826

New Principal Place of Business:

Current Mailing Address:

14400 PINE BRIDGE RUN.
ORLANDO, FL 32826

New Mailing Address:

FEI Number: 20-0996202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SARMIENTO, LUIS G
14400 PINE BRIDGE RUN
ORLANDO, FL 32826 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: SARMIENTO, LUIS G
Address: 14400 PINE BRIDGE RUM
City-St-Zip: ORLANDO, FL 32826

Title: S () Delete
Name: RAMOS, SARA
Address: 2265 ARBON AVE
City-St-Zip: ORLANDO, FL 32833

Title: T () Delete
Name: RAMOS, SARA
Address: 2265 ARDON AVE
City-St-Zip: ORLANDO, FL 32833

Title: D () Delete
Name: CORTES, JESUS
Address: 814 HALLOWELL CIRCLE
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: RAMOS, JOSEL JR
Address: 2265 ARDON AVE
City-St-Zip: ORLANDO, FL 32833

Title: D () Delete
Name: CORTES, ELVIN
Address: 814 HOLLOWELL CIR
City-St-Zip: ORLANDO, FL 32828

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: () 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: LUIS G. SARMIENTO

P

03/16/2009

Electronic Signature of Signing Officer or Director

Date