

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005466

FILED
Apr 17, 2009
Secretary of State

Entity Name: SEMINARIO BIBLICO ALIANZA DE LA FLORIDA CENTRAL INC.

Current Principal Place of Business:

2617 MICHIGAN AVE.
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

PO BOX 450141
KISSIMMEE, FL 34745

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: D () Delete
Name: RIVERA, JORGE
Address: 1322 OAK GROVE CT
City-St-Zip: KISSIMMEE, FL 34744

Title: P () Delete
Name: RIVERA, JORGE IVAN
Address: 1322 OAK GROVE CT.
City-St-Zip: KISSIMMEE, FL 34744

Title: S () Delete
Name: MOREJON, YOLANDA
Address: 1397 SIERRA CR.
City-St-Zip: KISSIMMEE, FL 34744

Title: T () Delete
Name: AGOSTO, ILEANA
Address: 946 ST. CROIX CT.
City-St-Zip: ORLANDO, FL 32835

Title: TR () Delete
Name: DENIZARD, EDISON
Address: 5366 TORTUGA DR.
City-St-Zip: ORLANDO, FL 32837

Title: () Delete
Name:
Address:
City-St-Zip:

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: MOREJON, YOLANDA
Address: 1397 SIERRA CR
City-St-Zip: KISSIMMEE, FL 34744

Title: TR (X) Change () Addition
Name: CALDERON, LUIS
Address: 2751 EAGLE CANYON DRIVE SOUTH
City-St-Zip: KISSIMMEE, FL 34746

Title: TR () Change (X) Addition
Name: APONTE, ELIAT
Address: 1206 CHEROKEE CT.
City-St-Zip: KISSIMMEE, FL 34744

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: JORGE I. RIVERA

DP

04/17/2009

Electronic Signature of Signing Officer or Director

Date