## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Mar 28, 2006 8:00 am Secretary of State 03-28-2006 90250 001 \*\*\*\*61.25 DOCUMENT # N04000006131 03-28-2006 90250 002 \*\*\*\*\*8.75 IGLESIA EVANGELICA EL TABOR JEHOVA NISSI INC. Principal Place of Business Mailing Address 66007443 246 ARLINGTON AVE P O BOX 82 BRONSON, FL 32621 LADY LAKE, FL 32159 02282006 CR2E037 (11/05) City & State 4. FEI Number Applied For 80-0113985 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TRINIDAD, RAMON PINE OAK HILL 60 STREET 110 AVEs Not Acceptable) BRONSON, FL 32621 8. The above named entity submits this statement for the purpose of changing its registered office or register ooth, in the State of Florida. I am familiar with, the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) name of registered agent and title if applicable. 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME TRINIDAD, RAMON NAME STREET ADDRESS STREET ADDRESS PINE OAK HILL 60 STREET 110 AVE CITY-ST-ZIP BRONSON, FL 32621 CITY-ST-ZIP VΡ TITLE ☐ Delete ☐ Change ☐ Addition NAME TRINIDAD, KATALINA NAME PINE OAK HILL 60 STREET 110 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRONSON, FL 32621 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition JASSO, ALMA R NAME NAME 246 ARLINGTON AVE STREET ADDRESS STREET ADDRESS LADY LAKE, FL 32159 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition FIGUEROA, ANA L NAME NAME **6061 NE 101 TERRACE** STREET ADDRESS STREET ADDRÉSS BRONSON, FL 32621

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 other like empowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

CITY - ST - ZIP

STREET ADDRESS

CITY - ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

☐ Change

☐ Change

☐ Addition

Addition

FILED



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 2, 2006

IGLESIA EVANGELICA EL TABOR JEHOVA NISSI INC. P O BOX 82 BRONSON, FL 32621

SUBJECT: IGLESTA EVANGELICA EL TABOR JEHOVA NISSI INC.

Ref. Number: N04000006131

We have received your check(s) totaling \$61.25; however it cannot be processed and is being returned for the following:

There was not a completed annual report/reinstatement application form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report/Uniform Business Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

PAMELA YARBOR OPS

Letter Number: 306A00014663