# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 14, 2006**
**Secretary of State**

DOCUMENT# N04000009715

**Entity Name:** IGLESIA PENTECOSTAL CAMINO DE SANTIDAD, INC. DE POINCIANA

**Current Principal Place of Business:**

407 BRITTEN DR
KISSIMMEE, FL 34758 US

**New Principal Place of Business:**

**Current Mailing Address:**

407 BRITTEN DR
KISSIMMEE, FL 34758 US

**New Mailing Address:**

**FEI Number: 20-1813060** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JORGE, SEGURA
407 BRITTEN DR
KISSIMMEE, FL 34758 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: DP ( ) Delete
Name: SEGURA, JORGE
Address: 407 BRITTEN DR
City-St-Zip: KISSIMMEE, FL 34758 US

Title: DVP ( ) Delete
Name: SEGURA, MIGDALIA
Address: 407 BRITTEN DR
City-St-Zip: KISSIMMEE, FL 34758 US

Title: D ( ) Delete
Name: REYES, JAIME
Address: 8 ALICANTE CT.
City-St-Zip: KISSIMMEE, FL 34758 US

Title: T ( ) Delete
Name: SUAREZ, JESUS
Address: 2485 PARSONS POND CR.
City-St-Zip: KISSIMMEE, FL 34743 US

Title: S ( ) Delete
Name: MARTINEZ, FLORDALIZA
Address: 3380 PINERIDGE CR.
City-St-Zip: KISSIMMEE, FL 34746 US

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: FLORDALIZA MARTINEZ S 02/14/2006

Electronic Signature of Signing Officer or Director — Date