2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010035

PENIEL CONSERVATRICE CHURCH INC

FILED Apr 18, 2009 Secretary of State

Entity Nai	me: PENIEL (CONSERVATRICE CHURCH,	INC.				
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:			
	TH MILITARY LM BEACH, FL			3405 FOREST HILLS BLVD LAKE WORTH, FL 33406 New Mailing Address:			
Current M	lailing Addres	s:	New Maili				
P.O BOX 5 LAKE PAR	531203 RK, FL 33403						
FEI Number	: 14-1980530	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired (X)	
Name and	I Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:		
DULCIO, § 507 3RD § LAKE PAR		US	1395 EDÉ	DULCIO, STECKER 1395 EDEN ROAD WEST PALM BEACH, FL 33417 US			
	named entity : e of Florida.	submits this statement for the p	ourpose of changing	its registered	l office or registered agent, or	both,	
SIGNATUI	RE:			04/18/2009			
	Electror	ic Signature of Registered Age	ent		Date		
OFFICER	S AND DIREC	TORS:	ADDITION	IS/CHANGE	S TO OFFICERS AND DIRE	CTORS	
Title: Name: Address: City-St-Zip:	CHARLOT, DAY 230 NORTH W		Title: Name: Address: City-St-Zip:		()Change ()Addition		
Title: Name: Address: City-St-Zip:	D () DULCIO, STEC 507 3RD STRE LAKE PARK, FI	ET	Title: Name: Address: City-St-Zip:	DULCIO, STI 1395 EDEN			
Title: Name: Address: City-St-Zip:	CHARLOT, JOS 1008 CHERRY		Title: Name: Address: City-St-Zip:		()Change ()Addition		
Title: Name: Address: City-St-Zip:	THELAMOUR, PO BOX 986	Delete THELSON EACH, FL 33402	Title: Name: Address: City-St-Zip:		()Change ()Addition		
Title: Name:	D () BERTRAND, JE	Delete EAN	Title: Name:		() Change () Addition		

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.

Address:

City-St-Zip:

SIGNATURE: PASTOR STECKER DULCIO D 04/18/2009

5521 BOYTON PLACE CIRCLE

BOYTON BEACH, FL 33437

Address:

City-St-Zip: