

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000521

FILED  
Mar 21, 2009  
Secretary of State

Entity Name: IGLESIA BAUTISTA RENACER DE WPB, INC

**Current Principal Place of Business:**

301 CHERRY RD  
W PALM BEACH, FL 33409

**New Principal Place of Business:**

**Current Mailing Address:**

301 CHERRY RD  
W PALM BEACH, FL 33409

**New Mailing Address:**

FEI Number: 20-2526871      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LLANES, HECTOR  
305 LAKEVIEW DR E  
ROYAL PALM BEACH, FL 33411      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: RODRIGUEZ, JAVIER F  
Address: 203 FOXTAIL DR - # 2A  
City-St-Zip: GREENACRES, FL 33415

Title: VP ( ) Delete  
Name: CORTES, ISRAEL  
Address: 2112 LONGWOOD RD  
City-St-Zip: W PALM BEACH, FL 33409

Title: TREA ( ) Delete  
Name: FERRER, CLEMENTE  
Address: 712 PATRIC DR  
City-St-Zip: W PALM BEACH, FL 33406

Title: T ( ) Delete  
Name: LLANES, HECTOR  
Address: 305 LAKEVIEW DR E  
City-St-Zip: ROYAL PALM BEACH, FL 33411

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TREA (X) Change ( ) Addition  
Name: LLANES, HECTOR  
Address: 305 LAKEVIEW DR. E  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: TR (X) Change ( ) Addition  
Name: RODRIGUEZ, ANA C  
Address: 500 EXECUTIVE CTR. DR APT. #5-F  
City-St-Zip: WEST PALM BEACH, FL 33401

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: HECTOR LLANES

Electronic Signature of Signing Officer or Director

TREA

03/21/2009

\_\_\_\_\_ Date