

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 8:00 am
Secretary of State

03-15-2006 90108 027 ****61.25

DOCUMENT # N05000009011

1. Entity Name
IGLESIA EL CAMINO DEL SENOR, INC.



Principal Place of Business
235 THIRD STREET SOUTH SUITE 300
ST PETERSBURG, FL 33701

Mailing Address
235 THIRD STREET SOUTH SUITE 300
ST PETERSBURG, FL 33701

50002648



2. Principal Place of Business
5995 Park Blvd. No.

3. Mailing Address
5995 Park Blvd No.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01302006 Chg-NP CR2E037 (11/05)

City & State
Pinellas Park, FL

City & State
Pinellas Park, FL

4. FEI Number
20-3413520

Applied For
Not Applicable

Zip
33781

Country
Pinellas

Zip
33781

Country
Pinellas

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ESCRUCERIA, LUIS D
5495 PARK BLVD NORTH
PINELLAS PARK, FL 33781

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 4, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Pastor (President) & Director
Escrucia, Luis D. (Director)
6408 - 109th Avenue North
Pinellas Park, FL 33782

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer & Director
Rivera, Angel
5151 - 4th Street N. #211
St. Petersburg, FL 33703

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Ch Deacons (Director)
Vazquez, Miguel
4507 Bray Road
Tampa, FL 33634

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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STREET ADDRESS
CITY-ST-ZIP
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

Luis D. Escrucia

Luis D. Escrucia Mar 6 2006 (813) 244-7365

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #