

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010359

FILED  
Apr 29, 2006  
Secretary of State

**Entity Name:** THE FATHER'S BRIDGE INTERNATIONAL CHURCH INC.

**Current Principal Place of Business:**

1444 EDEN DRIVE  
DELTONA, FL 32725 US

**New Principal Place of Business:**

**Current Mailing Address:**

1444 EDEN DRIVE  
DELTONA, FL 32725 US

**New Mailing Address:**

**FEI Number:** 06-1760275

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOLER, WILFREDO  
1444 EDEN DRIVE  
DELTONA, FL 32725 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: SOLER, WILFREDO  
Address: 1444 EDEN DRIVE  
City-St-Zip: DELTONA, FL 32725 US

Title: VP ( ) Delete  
Name: SOLER, SELINES  
Address: 1444 EDEN DRIVE  
City-St-Zip: DELTONA, FL 32725 US

Title: SEC ( ) Delete  
Name: SOLER, SELINES  
Address: 1444 EDEN DRIVE  
City-St-Zip: DELTONA, FL 32725 US

Title: T ( ) Delete  
Name: FALCON, NOELIA E  
Address: 375 PALM SPRINGS DRIVE APT. 1108  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 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:

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: WILFREDO SOLER

P

04/29/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date