## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000011194

Address:

City-St-Zip:

FILED Mar 08, 2008 Secretary of State

Entity Name: IGLESIA MOVIMIENTO DE VIDA Y PODER 1RA CORINTIOS 2:5, INC. **Current Principal Place of Business: New Principal Place of Business:** LAKEVIEW PLZ 1420 HWY. 20 INTERLACHEN, FL 32148 **New Mailing Address: Current Mailing Address:** 121 GUY AVE 302 LAKEVIEW TRL. INTERLACHEN, FL 32148 INTERLACHEN, FL 32148 FEI Number: 76-0838408 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RAMOS, DAMARIS RODRIGUEZ, VANNESSA 512 ANNETTE AVE 601 SOUTH CAROLINA ST INTERLACHEN, FL 32148 US US HAWTHORNE, FL 32640 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: VANNESSA RODRIGUEZ 03/08/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition DEL TORO CRUZ, JORGE GOITIA, MINERVA Name: Name: Address: AVE GUY #21 Address: URB VALLE HERMOSO C\MARGARITA ST-21 City-St-Zip: INTERLACHEN, FL 32148 City-St-Zip: HORMIGUEROS, PR Title: Title: ( ) Change (X) Addition ( ) Delete PAGAN-IRIZARRY, HECTOR I Name: Name: Address: Address: 836 HWAY 20 #2 City-St-Zip: City-St-Zip: INTERLACHEN, FL 32148 Title: () Delete Title: ( ) Change (X) Addition BASABE, JUAN A Name: Name:

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:

302 LAKEVIEW TRL.

INTERLACHEN, FL 32148

SIGNATURE: HECTOR I. PAGAN IRIZARRY V 03/08/2008