

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001993

FILED
Jan 27, 2009
Secretary of State

Entity Name: IGLESIA CRISTIANA MISIONERA (DISCIPULOS DE CRISTO) EN PONCIANA, INC.

Current Principal Place of Business:

4954 OLD PLEASANT HILL ROAD
KISSIMMEE, FL 34759

New Principal Place of Business:

Current Mailing Address:

4954 OLD PLEASANT HILL ROAD
KISSIMMEE, FL 34759

New Mailing Address:

FEI Number: 86-1161434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHARLES, HOWARD J
3510 SHOREWOOD DRIVE
KISSIMMEE, FL 34746 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: D () Delete
Name: CHARLES, HOWARD J
Address: 3510 SHOREWOOD DR
City-St-Zip: KISSIMMEE, FL 34746

Title: D () Delete
Name: ROMAN, CASIMIRA
Address: 924 WOODSIDE CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

Title: D () Delete
Name: CHARLES, LUISA
Address: 3510 SHOREWOOD DR
City-St-Zip: KISSIMMEE, FL 34746

Title: D () Delete
Name: ORTIZ, CHERYL I
Address: 3516 SHOREWOOD DR
City-St-Zip: KISSIMMEE, FL 34746

Title: D () Delete
Name: GUERRA, WANDA
Address: 1690 BIG OAK LN
City-St-Zip: KISSIMMEE, FL 34746

Title: D () Delete
Name: GUERRA, DAVID
Address: 1690 BIG OAK LN
City-St-Zip: KISSIMMEE, FL 34746

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:

Title: D (X) Change () Addition
Name: OTERO, MARIO
Address: 474 ACACIA TREE WAY
City-St-Zip: KISSIMMEE, FL 34758

Title: D (X) Change () Addition
Name: NIEVES, GUILLERMO
Address: 306 BARGOR WAY
City-St-Zip: KISSIMMEE, FL 34758

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: HOWARD J. CHARLES

PRES

01/27/2009

Electronic Signature of Signing Officer or Director

_____ Date