

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002274

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: IGLESIA EVANGELICA RIOS DE AGUA VIVA, I.E.D. INC.

**Current Principal Place of Business:**

348 RACETRACK RD NW  
FORT WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

745 BEAL PRWY NW STE #12  
FORT WALTON BEACH, FL 32547

**New Mailing Address:**

FEI Number: 20-4454090

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARDONA, OLMAN  
726 EGLIN PRWY NE E-1  
FORT WALTON BEACH, FL 32547 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: DP ( ) Delete  
Name: CARDONA, OLMAN  
Address: 726 EGLIN PRWY NE E-1  
City-St-Zip: FORT WALTON BEACH, FL 33547

Title: V ( ) Delete  
Name: RODRIGUEZ, ERIC  
Address: 745 BEAL PRWY NW STE #12  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: T ( ) Delete  
Name: LUNA, GASPAR  
Address: 745 BEAL PRWY NW STE #12  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S ( ) Delete  
Name: RUBIO, ALEJANDRO  
Address: 745 BEAL PRWY NW STE #12  
City-St-Zip: FORT WALTON BEACH, FL 32547

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

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

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

Title: T (X) Change ( ) Addition  
Name: MURILLO, JORGE A  
Address: 726 EGLIN PRWY NE E-1  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S (X) Change ( ) Addition  
Name: GOMEZ, AUGUSTO  
Address: 1318 LEWIS TURNER BLVD LOT#5  
City-St-Zip: FORT WALTON BEACH, FL 32547

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: OLMAN M. CARDONA

DP

04/30/2009

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

\_\_\_\_\_  
Date