

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005128

Entity Name: IGREJA BATISTA VIDA INC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

3800 FOWLER STREET
UNIT 6
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

3800 FOWLER STREET
UNIT 6
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 20-4854420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, ANDERSON O
3122 40TH STREET SW
LEHIGH ACRES, FL 33976 US

Name and Address of New Registered Agent:

SILVA, ANDERSON O
4023 CHERRYBROOK LOOP
FORT MYERS, FL 33966 US

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: ANDERSON SILVA

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SILVA, ANDERSON O
Address: 3122 40TH STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: TD () Delete
Name: SILVA, PATRICIA
Address: 3122 40TH STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: SD () Delete
Name: SILVA, TEODORA C
Address: 1024 NW 14TH STREET
City-St-Zip: CAPE CORAL, FL 33993

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SILVA, ANDERSON O
Address: 4023 CHERRYBROOK LOOP
City-St-Zip: FORT MYERS, FL 33966

Title: TD (X) Change () Addition
Name: ASSIS, CHALIMAR F
Address: 2024 SW 28TH TER
City-St-Zip: CAPE CORAL, FL 33914

Title: SD (X) Change () Addition
Name: LULSDORF, ANA P
Address: 2937 WINKLER AVE #1219
City-St-Zip: FORT MYERS, FL 33916

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: ANDERSON SILVA

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date