## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000007492

Entity Name: IGLESIA RALITISTA SUMANNEE INC.

FILED Apr 15, 2009 Secretary of State

Littly Na	ille. IGLESIA	BAOTISTA SOVVANNEL INC.			
Current Principal Place of Business:			New Principal Place of Busine	New Principal Place of Business:	
19112 74 ST LIVE OAK, FL 32060			10413 US HWY 129 S LIVE OAK, FL 32062		
Current M	lailing Addre	ss:	New Mailing Address:	New Mailing Address:	
10413 US HWY 129 S LIVE OAK, FL 32064			10413 US HWY 129 S LIVE OAK, FL 32062		
FEI Number	: 20-5280419	FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certification	ate of Status Desired (X)	
Name and	Address of	Current Registered Agent:	Name and Address of New Reg	jistered Agent:	
The above	STREET , FL 32060	US submits this statement for the p	urpose of changing its registered office or i	registered agent, or both,	
SIGNATU		-i- 0if Di-t	-1	Dete	
	Electro	nic Signature of Registered Age	ıı	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OF	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( GONZALEZ, A 17708 136 ST LIVE OAK, FL	REET	Title: ( ) Change Name: Address: City-St-Zip:	( ) Addition	
Title: Name: Address: City-St-Zip:	MALDONADO,	E AVENUE S.W	Title: VP (X) Change Name: GONZALEZ, MAYRA Address: 17708 136 STREET City-St-Zip: LIVE OAK, FL 32060	( ) Addition	
Title: Name: Address: City-St-Zip:	T ( PADRON, ROE 19112 74 STR LIVE OAK, FL	EET	Title: ( ) Change Name: Address: City-St-Zip:	( ) Addition	
Title: Name: Address: City-St-Zip:	S ( GONZALEZ, M 17708 136 ST LIVE OAK, FL	REET	Title: ( ) Change Name: Address: City-St-Zip:	( ) Addition	
Title: Name: Address: City-St-Zip:	VSD ( BATISTA, TER 19112 74TH S LIVE OAK, FL	TREET	Title: ( ) Change Name: Address: City-St-Zip:	( ) Addition	

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: MAYRA GONZALEZ VP 04/15/2009