

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008602

FILED  
Jan 11, 2007  
Secretary of State

Entity Name: IGLESIA GOSEN PENTECOSTAL, INC

## Current Principal Place of Business:

1218 S DFEDERAL HWY #2  
LAKEWORTH, FL 33460

## New Principal Place of Business:

## Current Mailing Address:

1218 S DFEDERAL HWY #2  
LAKEWORTH, FL 33460

## New Mailing Address:

FEI Number: 20-5339397

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPEZ-VELEZ, ALFONSO  
405 DATE PALM DR  
LAKE WORTH, FL 33640 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: PP ( ) Delete  
Name: LOARCA, SOCORRO F  
Address: 1218 S DFEDERAL HWY #2  
City-St-Zip: LAKEWORTH, FL 33460

Title: S ( ) Delete  
Name: MONROY, CECILIA  
Address: 1218 S DFEDERAL HWY #2  
City-St-Zip: LAKEWORTH, FL 33460

Title: T ( ) Delete  
Name: LOPEZ-VELEZ, ALFONSO  
Address: 405 DATE PALM DR  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PP (X) Change ( ) Addition  
Name: LOARCA, SOCORRO F  
Address: 1218 S FEDERAL HWY #2  
City-St-Zip: LAKEWORTH, FL 33460

Title: S (X) Change ( ) Addition  
Name: MONROY, CECILIA  
Address: 1218 S FEDERAL HWY #2  
City-St-Zip: LAKEWORTH, FL 33460

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SOCORRO F. LOARCA

PP

01/11/2007

Electronic Signature of Signing Officer or Director

Date