

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009809

FILED
Jun 16, 2009
Secretary of State

Entity Name: IGLESIA DEL DIOS VIVIENTE INC.

Current Principal Place of Business:

4921 EAST COLONIAL
ORLANDO, FL 32803

New Principal Place of Business:

427 GASTON FOSTER RD.
ORLANDO, FL 32807

Current Mailing Address:

4417 ANDOVER CAY BLVD
ORLANDO, FL 32825

New Mailing Address:

FEI Number: 06-1794095 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GONZALEZ, DONNA
4417 ANDOVER CAY BLVD
ORLANDO, FL 32825 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GONZALEZ, DONNA
Address: 4417 ANDOVER CAY BLVD
City-St-Zip: ORLANDO, FL 32825

Title: S () Delete
Name: GONZALEZ, JOAN
Address: 10219 EASTERN LAKE AVE.
City-St-Zip: ORLANDO, FL 32817

Title: T () Delete
Name: GONZALEZ, HERMAN
Address: 10219 EASTERN LAKE AVE.
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: GONZALEZ, RAMON
Address: 4417 ANDOVER CAY BLVD
City-St-Zip: ORLANDO, FL 32807

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

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: DONNA GONZALEZ

P

06/16/2009

Electronic Signature of Signing Officer or Director

Date