

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010034

FILED
Apr 02, 2009
Secretary of State

Entity Name: CENTRO FAMILIAR APOSTOLICO, INC.

Current Principal Place of Business:

2102 NE 1ST TERRACE
CAPE CORAL, FL 33909

New Principal Place of Business:

4440 N HANCOCK BRIDGE PKWY
NORTH FORT MYERS, FL 33907

Current Mailing Address:

2102 NE 1ST TERRACE
CAPE CORAL, FL 33909

New Mailing Address:

4440 N HANCOCK BRIDGE PKWY
NORTH FORT MYERS, FL 33907

FEI Number: 43-2102437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OSORIO, JESUS R
2102 NE 1ST TERRACE
CAPE CORAL, FL 33909 US

Name and Address of New Registered Agent:

MENDOZA, OSCAR
2114 NE 1ST TERR
CAPE CORAL, FL 33909 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: OSCAR MENDOZA

04/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OSORIO, JESUS R
Address: 2102 NE 1ST TERRACE
City-St-Zip: CAPE CORAL, FL 33909

Title: VP () Delete
Name: OSORIO, VILMA E
Address: 2102 NE 1ST TERRACE
City-St-Zip: CAPE CORAL, FL 33909

Title: TRE (X) Delete
Name: GUZMAN, ARELI
Address: 2530 SW 30TH ST
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TRE (X) Change () Addition
Name: MENDOZA, OSCAR
Address: 2114 NE 1ST TERR
City-St-Zip: CAPE CORAL, FL 33909

Title: D (X) Change () Addition
Name: OSORIO, JESUS R
Address: 2102 NE 1ST TERRACE
City-St-Zip: CAPE CORAL, FL 33909

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: OSCAR MENDOZA

TRE

04/02/2009

Electronic Signature of Signing Officer or Director

Date