2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000241

Entity Name: IGLESIA CRISTIANA IMPACTO DE DIOS, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1825 HAMMOCK RD. SEBRING, FL 33872 **Current Mailing Address: New Mailing Address:** 611 CRANE STREET SEBRING, FL 33872 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COLON, RUTH 611 CRÂNE STREET SEBRING, FL 33872 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete ABREGO, LEOPOLDO ABREGO, LEOPOLDO Name: Name: 4135 COMMERCIAL DR Address: 1825 HAMMOCK RD. Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 Title: () Delete Title: (X) Change () Addition ABREGO, BLANCA Name: ABREGO, BLANCA Name: Address: 4135 COMMERCIAL DR Address: 1825 HAMMOCK RD. City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 Title: () Delete Title: (X) Change () Addition COLON, RAMON COLON, RAMON Name: Name: 4135 COMMERCIAL DR 1825 HAMMOCK RD. Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 Title: ST () Delete Title: ST (X) Change () Addition COLON, RUTH Name: COLON, RUTH Name: 4135 COMMERCIAL DR Address: Address: 1825 HAMMOCK RD. City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 Title: (X) Delete Title: () Change () Addition MEDINA, ELIEZER PASTOR Name: Name: 1 WOLF STREET Address: Address: City-St-Zip: AVON PARK, FL 33825 City-St-Zip: Title: (X) Delete Title: () Change () Addition MEDINA, LUZ PASTOR Name: Name: Address: 1 WOLF STREET Address: AVON PARK, FL 33825 City-St-Zip: 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: RUTH COLON SEC/ 04/30/2008