

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004231

FILED
Apr 28, 2009
Secretary of State

Entity Name: IGLESIA DE RECONCILIACION NUEVA VIDA, INC.

Current Principal Place of Business:

5337 GILBERT WAY
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

5337 GILBERT WAY
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 22-3963745

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PD () Delete
Name: CHACON, PABLO
Address: 5337 GILBERT WAY
City-St-Zip: LAKE WORTH, FL 33463

Title: VSD () Delete
Name: CHACON, EUDALI
Address: 5337 GILBERT WAY
City-St-Zip: LAKE WORTH, FL 33463

Title: TD () Delete
Name: DE ARTIME, REYNEL
Address: 5337 GILBERT WAY
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: BRANDA, PAOLA
Address: 5337 GILBERT WAY
City-St-Zip: LAKE WORTH, FL 33463

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: EUDALI CHACON

VSD

04/28/2009

Electronic Signature of Signing Officer or Director

Date