

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005256

FILED
Apr 12, 2008
Secretary of State

Entity Name: CENTRO CRISTIANO "ROCA DE VIDA", INC.

Current Principal Place of Business:

2100 PLEASANT HILL RD. #95
KISSIMMEE, FL 34746

New Principal Place of Business:

308 CR 409
CENTER HILL, FL 33514

Current Mailing Address:

2100 PLEASANT HILL RD. #95
KISSIMMEE, FL 34746

New Mailing Address:

895 CR 542 E
BUSHNELL, FL 33513

FEI Number: 26-0244899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSA, MANUEL REV.
2100 PLEASANT HILL RD. #95
KISSIMMEE, FL 34746 US

Name and Address of New Registered Agent:

ROSA, MANUEL REV.
2962 CR 762
WEBSTER, FL 33597 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: MANUEL ROSA

04/12/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSA, MANUEL REV.
Address: 2100 PLEASANT HILL RD. #95
City-St-Zip: KISSIMMEE, FL 34746

Title: VP () Delete
Name: RAMOS, LUIS O REV.
Address: 895 C.R. 542 E.
City-St-Zip: BUSHENELL, FL 33513

Title: S () Delete
Name: ROSA, CARMEN M REV.
Address: 2100 PLEASANT HILL RD. #95
City-St-Zip: KISSIMMEE, FL 34746

Title: T () Delete
Name: RAMOS, SYLVIA REV.
Address: 895 C.R. 542 E.
City-St-Zip: BUSHNELL, FL 33513

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSA, MANUEL REV.
Address: 2962 CR 762
City-St-Zip: WEBSTER, FL 33597

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

Title: S (X) Change () Addition
Name: ROSA, CARMEN M REV.
Address: 2962 CR 762
City-St-Zip: WEBSTER, FL 33597

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: MANUEL ROSA

P

04/12/2008

Electronic Signature of Signing Officer or Director

Date