

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000010408

FILED
Nov 05, 2009
Secretary of State

Entity Name: CENTRO CRISTIANO DE CAPE CORAL, INC

Current Principal Place of Business:

4206 DEL PRADO BLVD.
CAPE CORAL, FL 33914

New Principal Place of Business:

4427 SE 16TH PLACE
CAPE CORAL, FL 33914

Current Mailing Address:

4206 DEL PRADO BLVD.
CAPE CORAL, FL 33914

New Mailing Address:

4427 SE 16TH PLACE
CAPE CORAL, FL 33914

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUIDI, MARCELO
1113 SE 6TH TER
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

JOSEPH, DALEY
4427 SE 16TH PLACE
CAPE CORAL, FL 33914 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: JOSEPH DALEY

11/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GUIDI, MARCELO
Address: 1113 SE 6TH TER
City-St-Zip: CAPE CORAL, FL 33990

Title: VP () Delete
Name: ESTEVE, EDUARDO
Address: 806 SW 31ST STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: T (X) Delete
Name: FERNANDEZ, ORLANDO
Address: 2220 SW 12TH AVE.
City-St-Zip: CAPE CORAL, FL 33991

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOSEPH, DALEY
Address: 4427 SE 16TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

Title: VP (X) Change () Addition
Name: ROD, TROYER
Address: 4427 SE 16TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

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: JOSEPH DALEY

PRE.

11/05/2009

Electronic Signature of Signing Officer or Director

Date