

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001368

FILED  
Apr 26, 2009  
Secretary of State

Entity Name: IGLESIA TABERNÁCULO DE JESUCRISTO, INC.

## Current Principal Place of Business:

2004 MICHIGAN AVENUE  
KISSIMMEE, FL 34744 US

## New Principal Place of Business:

## Current Mailing Address:

3240 FAIRHAVEN AVENUE  
KISSIMMEE, FL 34746 US

## New Mailing Address:

2004 MICHIGAN AVENUE  
KISSIMMEE, FL 34744 US

FEI Number: 26-1977311

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LUNA, MARTA N  
3240 FAIRHAVEN AVENUE  
KISSIMMEE, FL 34746 US

## Name and Address of New Registered Agent:

LUNA, MARTA  
3240 FAIRHAVEN AVENUE  
KISSIMMEE, FL 34746 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: MARTA N. LUNA

04/26/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RAMOS, GABRIEL  
Address: 2442 AUGUSTA WAY  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VP ( ) Delete  
Name: HOLNESS, MARCOS A  
Address: 4120 VISTA LAGO CIRCLE  
City-St-Zip: KISSIMMEE, FL 34741 US

Title: T ( ) Delete  
Name: LUNA, SIXTO L  
Address: 3240 FAIRHAVEN AVENUE  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: S ( ) Delete  
Name: LUNA, MARTA N  
Address: 3240 FAIRHAVEN AVENUE  
City-St-Zip: KISSIMMEE, FL 34746 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: HOLNESS, MARCOS A  
Address: 2361 PINEDALE DRIVE  
City-St-Zip: KISSIMMEE, FL 34741 US

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

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: GABRIEL RAMOS

P

04/26/2009

Electronic Signature of Signing Officer or Director

Date