2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003339

Entity Name: IGLESIA LINCION ERESCA INC

FILED Jan 21, 2009 Secretary of State

Inches ital		, , , , , , , , , , , , , , , , , , ,				
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
	GREEN RD FRS, FL 33903	US				
Current M	ailing Address	s:	New Maili	New Mailing Address:		
P.O. BOX 1204 CAPE CORAL, FL 33915 US				P.O. BOX 151204 CAPE CORAL, FL 33915 US		
FEI Number: 74-3256444 FEI Number Applied For ()		FEI Number Not Appl	icable ()	Certificate of Status Desired (X)		
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
1110 SW 1 CAPE COP The above	RAL, FL 33991 named entity s	US	urpose of changing i	ts registered	d office or registered agent, or both,	
in the State	of Florida.	·		•		
SIGNATUR						
	Electroni	c Signature of Registered Age	nt	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () ESPINOSA, SAN 1110 SW 15TH A CAPE CORAL, F	AVE	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () CINTRON, ABIU 2013 SE 2ND ST CAPE CORAL, F	Г	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	TREA () RODRIGUEZ, FI 4906 VICTORIA CAPE CORAL, F	DR. APT. # 113	Title: Name: Address: City-St-Zip:	ESPINOSA, 1110 SW 15		
Title: Name: Address: City-St-Zip:	SEC (X) LOPEZ, GUILLE 1323 DIPLOMAT CAPE CORAL, F	PARKWAY E	Title: Name: Address: City-St-Zip:		() Change () Addition	

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: SAMUEL ESPINOSA SR P 01/21/2009