2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2012
Secretary of State

DOCUMENT# N08000005983

Entity Name: ASOCIACION DE PASTORES DE LA COSTA DEL TESORO, INC.

Current Principal Place of Business:

5905 OLEANDER AVENUE
FORT PIERCE, FL 34982

New Principal Place of Business:

532 SW MCCOMB AVE
PORT ST LUCIE, FL 34953

Current Mailing Address:

249 NE GLENTRY AVE
PORT SAINT LUCIE, FL 34983

New Mailing Address:

532 SW MCCOMB AVE
PORT ST LUCIE, FL 34953

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

URENA, EDUARDO
2716 SE KERN ROAD
PORT SAINT LUCIE, FL 34984 US

Name and Address of New Registered Agent:

HECTOR FABIO, OCAMPO
532 SW MCCOMB AVE
PORT SAINT LUCIE, FL 34953 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: HECTOR FABIO OCAMPO 04/21/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: OCAMPO, FABIO
Address: 532 SW MCCOMB AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VP
Name: NAVA, NESTOR
Address: 661 SANDBAR TER
City-St-Zip: PORT ST LUCIE, FL 34953

Title: S
Name: BARRIOS, DIEGO S
Address: 249 NE GLENTRY AVE
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: T
Name: CANO, ELVIN
Address: 966 SW ALCANTARRA BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: D
Name: ANTONIO, ARRIOJA
Address: 2195 55 AVENUE
City-St-Zip: VERO BEACH, FL 32966

I hereby 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 all other like empowered.

SIGNATURE: OCAMPO FABIO P 04/21/2012
Electronic Signature of Signing Officer or Director Date