

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006130

FILED
Jan 15, 2009
Secretary of State

Entity Name: IGLESIA DE DIOS JESUCRISTO ES NUESTRA PAZ, INC.

Current Principal Place of Business:

2042 FORSYTH RD.
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

2042 FORSYTH RD.
ORLANDO, FL 32807

New Mailing Address:

3251 BENSON PARK BLVD
ORLANDO, FL 32829

FEI Number: 26-2925154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PARRA, NELSON
3251 BENSON PARK BLVD.
ORLANDO, FL 32829 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PARRA, NELSON
Address: 3251 BENSON PARK BLVD.
City-St-Zip: ORLANDO, FL 32829

Title: D () Delete
Name: ROMERO, OLGA
Address: 3251 BENSON PARK BLVD.
City-St-Zip: ORLANDO, FL 32829

Title: D () Delete
Name: LUGO, NELSON
Address: 14266 SAPPFAIRE BAY CIR.
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: CHAVARRO, JOEL
Address: 502 SAN MARIE AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: OLGA ROMERO

D

01/15/2009

Electronic Signature of Signing Officer or Director

Date