

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010760

FILED
Apr 29, 2009
Secretary of State

Entity Name: IGLESIA DE DIOS CASA DEL ALFARERO, INC.

Current Principal Place of Business:

768 PELICAN CT
POINCIANA, FL 34759

New Principal Place of Business:

395 MARIGOLD AVE
RM. 104
POINCIANA, FL 34759

Current Mailing Address:

768 PELICAN CT
POINCIANA, FL 34759

New Mailing Address:

768 PELICAN CT
KISSIMMEE, FL 34759

FEI Number: 01-0919483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARCIA, JUAN
768 PELICAN CT
POINCIANA, FL 34759 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: GARCIA, JUAN
Address: 768 PELICAN CT
City-St-Zip: POINCIANA, FL 34759

Title: D () Delete
Name: CASTRO, CARLOS
Address: 768 PELICAN CT
City-St-Zip: POINCIANA, FL 34759

Title: D () Delete
Name: RODRIGUEZ, JEANETTE
Address: 846 JARNAC DR
City-St-Zip: POINCIANA, FL 34759

Title: D (X) Delete
Name: VINALES, WALESKA
Address: 852 ADOUR DR
City-St-Zip: POINCIANA, FL 34759

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: JUAN GARCIA

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date