

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008800

FILED  
Feb 13, 2012  
Secretary of State

**Entity Name:** EQUIPPING CENTER INTERNATIONAL CHURCH, INC.

**Current Principal Place of Business:**

4085 LAKE ELEANOR DR.  
MT. DORA, FL 32757

**New Principal Place of Business:**

1100 E. ALFRED STREET  
TAVARES, FL 32778

**Current Mailing Address:**

4085 LAKE ELEANOR DR.  
MT. DORA, FL 32757

**New Mailing Address:**

FEI Number: 26-2926454      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CRUZ'SEIN, ANGELO R II  
4085 LAKE ELEANOR DR.  
MT. DORA, FL 32757      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: P  
Name: CRUZ'SEIN, ANGELO R DR.  
Address: 4085 LAKE ELEANOR DR.  
City-St-Zip: MT. DORA, FL 32757

Title: V  
Name: CRUZ'SEIN, BERTHA PASTOR  
Address: 4085 LAKE ELEANOR DR.  
City-St-Zip: MT. DORA, FL 32757

Title: T  
Name: MCKEE, MELVIN  
Address: 7765 LAKE ANDREA CIRCLE  
City-St-Zip: MT DORA, FL 32757

Title: ST  
Name: MCKEE, EVONNE  
Address: 7765 LAKE ANDREA CIRCLE  
City-St-Zip: MT DORA, FL 32757

Title: T  
Name: BLAKE, PINKEY  
Address: 318 S. GROVE STREET  
City-St-Zip: EUSTIS, FL 32726

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: ANGELO R. CRUZ'SEIN, II

DR.

02/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date