

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11500

FILED
Feb 10, 2009
Secretary of State

Entity Name: UNITED BRETHRENS IN CHRIST CHURCH, INC.

Current Principal Place of Business:

115-117 WEBSTER ST
INTERLACHEN, FL 32148

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1765
INTERLACHEN, FL 32148

New Mailing Address:

FEI Number: 59-2699307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERNARDINI, WILFREDO SR.
107 PANAMA ST.
INTERLACHEN, FL 32148 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: PD () Delete
Name: ORTIZ, JUAN A
Address: 110 COLONY ST./PO BOX 4071
City-St-Zip: MERIDEN, CT 06450

Title: VP () Delete
Name: BERNARDINI, WILFREDO
Address: 107 PANAMA ST./ PO BOX 2071
City-St-Zip: INTERLACHEN, FL 32148

Title: SD () Delete
Name: BERNARDINI, MYRIAM
Address: 107 PANAMA ST./PO BOX 2071
City-St-Zip: INTERLACHEN, FL 32148

Title: TD () Delete
Name: SANTIAGO, JANNETTE
Address: PO BOX 972
City-St-Zip: INTERLACHEN, FL 32148

Title: TD () Delete
Name: BRUNO, JOSE
Address: 16423 NELSON PARK DR
City-St-Zip: CLEARMONT, FL 34714

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:

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: JANNETTE SANTIAGO

TD

02/10/2009

Electronic Signature of Signing Officer or Director

Date