

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11566

FILED
Apr 19, 2007
Secretary of State

Entity Name: IGLESIA BAUTISTA DE SEBRING, INC.

Current Principal Place of Business:

721 MEMORIAL DR
SEBRING, FL 33872

New Principal Place of Business:

Current Mailing Address:

721 MEMORIAL DR
SEBRING, FL 33870

New Mailing Address:

FEI Number: 59-2590660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBLES, JUAN A PASTOR
3314 VALERIE BLVD
SEBRING, FL 33870 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: MAYSONET, DANIEL
Address: 3726 VIOLET AVE
City-St-Zip: SEBRING, FL 33870

Title: PT () Delete
Name: ROBLES, JUAN A
Address: 3314 VALERIE BLVD
City-St-Zip: SEBRING, FL 33870

Title: T () Delete
Name: LOPEZ, JUAN A
Address: 134 LAKE CALOOSA LANDING
City-St-Zip: FROSTPROOF, FL 33843

Title: S () Delete
Name: GONZALEZ, MARICELA
Address: 4501 SEBRING AVE
City-St-Zip: SEBRING, FL 33872

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: S (X) Change () Addition
Name: GONZALEZ, MARICELA
Address: 4115 BIANCA ST
City-St-Zip: SEBRING, FL 33872

I hereby certify that the information supplied with this filing does not qualify for the 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 A. ROBLES

PT

04/19/2007

Electronic Signature of Signing Officer or Director

Date