2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11566

FILED Mar 24, 2009 Secretary of State

Entity Name: IGLESIA BAUTISTA DE SEBRING, INC.

Current Principal Place of Business: New Principal Place of Business:

721 MEMORIAL DR 721 MEMORIAL DR SEBRING, FL 33872 SEBRING, FL 33870

Current Mailing Address: New Mailing Address:

721 MEMORIAL DR SEBRING, FL 33870

FEI Number: 59-2590660 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ROBLES, JUAN A PASTOR 3314 VALERIE BLVD SEBRING, FL 33870 US

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:

Flateria Constant of Desirtant Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D () Delete
 Title:
 PT (X) Change () Addition

 Name:
 MAYSONET, DANIEL
 Name:
 ROBLES, JUAN A PASTOR

 Address:
 3726 VIOLET AVE
 Address:
 3314 VALERIE BLVD

 City-St-Zip:
 SEBRING, FL 33870
 SEBRING, FL 33870

 Title:
 PT
 () Delete
 Title:
 M
 (X) Change () Addition

 Name:
 ROBLES, JUAN A
 Name:
 ROBLES, CARMEN MIN.

 Address:
 3314 VALERIE BLVD
 Address:
 3314 VALERIE BLVD

Address: 3314 VALERIE BLVD
City-St-Zip: SEBRING, FL 33870
Address: 3314 VALERIE BLVD
City-St-Zip: SEBRING, FL 33870
City-St-Zip: SEBRING, FL 33870

Title: T () Delete Title: T (X) Change () Addition

 Name:
 LOPEZ, JUAN A
 Name:
 AYALA, MICHEL MR

 Address:
 134 LAKE CALOOSA LANDING
 Address:
 1807 WARFIELD PLACE

 City-St-Zip:
 FROSTPROOF, FL 33843
 City-St-Zip:
 SEBRING, FL 33870

 $\label{eq:title:S} {\sf Title:S} \qquad \qquad {\sf S} \qquad {\sf (A) Change (A) Addition}$

Name:GONZALEZ, MARICELAName:BONILLA, MIGDALIA MRSAddress:4101 PONCE DE LEON BLVDAddress:4724 PEABLE BEACH DR.City-St-Zip:SEBRING, FL 33872City-St-Zip:SEBRING, FL 33872

Title: A () Delete Title: A (X) Change () Addition Name: GARCIA, ROSA Name: GARCIA RENTAS, YOLANDA MRS

 Address:
 9420 SADDLE PATH RD
 Address:
 2608 HOPE CIRCLE

 City-St-Zip:
 SEBRING, FL 33870
 City-St-Zip:
 SEBRING, FL 33870

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 A. ROBLES REV. 03/24/2009