

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# N12426

Entity Name: IGLESIA CRISTIANA EL BUEN SAMARITANO, INC.

Current Principal Place of Business:

25795 SW 137 AVENUE
PRINCETON, FL 33032

New Principal Place of Business:

Current Mailing Address:

25795 SW 137 AVENUE
PRINCETON, FL 33032

New Mailing Address:

FEI Number: 59-2839224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FIGUEROA, ROSA
1451 NE 10TH STREET
HOMESTEAD, FL 33033 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: URGELLES, MELQUIADES PD
Address: 25851 S.W. 133 CT.
City-St-Zip: PRINCETON, FL 33032 US

Title: VD () Delete
Name: URGELLES, WILMER VD
Address: 15104 S W 298TH TERRACE
City-St-Zip: LEISURE CITY, FL 33033 US

Title: SD () Delete
Name: FIGUEROA, ROSA M SD
Address: 1451 N.E. 10TH ST.
City-St-Zip: HOMESTEAD, FL 33030 US

Title: D () Delete
Name: HOLGUIN, AUREO R D
Address: 25071 S.W. 124 PL
City-St-Zip: PRINCETON, FL 33032 US

Title: D () Delete
Name: ARNAL, FRANCISCA D
Address: 13340 SW 257TH TERRACE
City-St-Zip: PRINCETON, FL 33032 US

Title: TD () Delete
Name: URGELLES, MELQUIS TD
Address: 20254 SW 131 COURT
City-St-Zip: PRINCETON, FL 33032 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: HOLGUIN, AUREO VD
Address: 25071 S.W. 124 PL
City-St-Zip: PRINCETON, FL 33032 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DE JESUS, JUAN J D
Address: 18700 S.W. 294 TERR.
City-St-Zip: PRINCETON, FL 33032 US

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 for the exemption stated in Section 119.07(3)(i), 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: MELQUIADES URGELLES

PD

04/30/2005

Electronic Signature of Signing Officer or Director

Date