2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12426

SIGNATURE: MELQUIADES URGELLES

Electronic Signature of Signing Officer or Director

FILED May 20, 2008 Secretary of State

Entity Name: IGLESIA CRISTIANA EL BUEN SAMARITANO, INC.

Current Principal Place of Business:		New Principal Place of Business:	
25795 SW 137 AVENUE PRINCETON, FL 33032			
Current Mailing Address:		New Mailing Address:	
25795 SW 137 AVENUE PRINCETON, FL 33032			
FEI Number: 59-2839224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
FIGUEROA, ROSA 1451 NE 10TH STREET HOMESTEAD, FL 33033 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:			
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete URGELLES, MELQUIADES PD 25851 S.W. 133 CT. PRINCETON, FL 33032 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VD () Delete HOLGUIN, AUREO VD 25071 S.W. 124 PL PRINCETON, FL 33032 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SD () Delete FIGUEROA, ROSA M SD 1451 N.E. 10TH ST. HOMESTEAD, FL 33030 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete DE JESUS, JUAN J D 18700 S.W. 294 TERR. PRINCETON, FL 33032 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete ARNAL, FRANCISCA D 13340 SW 257TH TERRACE PRINCETON, FL 33032 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD () Delete URGELLES, MELQUIS TD 20254 SW 131 COURT PRINCETON, FL 33032 US	Title: Name: Address: City-St-Zip:	() Change () Addition
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.			

PD

05/20/2008

Date