FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State
04-26-1999 90125 012 ****61.25

DOCUMENT # N26018 (4)

1. Corporation Name

FIRST SPANISH CHURCH OF CITRUS COUNTY CORPORATION

Principal Place of Business	Mailing Address
1370 N CROFT AVE BOX 2053 INVERNESS, FL 34451	PASTOR TEDDY APONTE 13805 SW 114th LANE ROLLING RANCH ESTATE DUNNELLON FL 34432

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	02/10/1988
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number: 59-2888369 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
RUBEN SIERRA SIERRA 1205 LAKEVIEW DRIVE INVERNESS, FL 34450	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE VPD RIVERA, CARMEN 6342 E. GURLEY ST. INVERNESS FL 34452	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE PD APONTE TEDDY 13805 S W 114th LANE ROLLING RANCH EST DUNNELLON FL 34432	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE VPD PEREZ, JUAN 6034 PEACH ST. INVERNESS FL 34452	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE VPD DANOIS ANA 6360 E. GURLEY ST. INVERNESS, FL. 34452	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE SD DIAZ, MARGARITA WASHINGTON SQUARE #37 INVERNESS, FL. 34450	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition SD RIVERA, NORBERTO 14547 SW 39th CT RD OCALA FL. 32673
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE TD SIERRA SIERRA, RUBEN 1205 LAKEVIEW DR. INVERNESS, FL. 34450	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07 3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rubin Sierra Sierra 04-13-99 352-637-2941
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)