## **FILE NOW: FILING FEE IS \$61.25**

NØNPROFIT COMPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mörtham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #

1. Corporation Name

Principal Place of Business

N32515

Mailing Address

IGLESIA CRISTIANA HISPANA (DISCIPULOS DE CRISTO) DE ORLANDO INC.

1561 N. CHICKASAW TRAIL P.O. BOX 677969 ORLANDO FL 32825 ORLANDO FL 32867-7969 3. Date incorporated or Qualified 3a. Date of Last Report 05/25/1989 08/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3226425 26 Not Applicable Suite. Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation has liability for intangible tax ander s. 199.032, ☐ Yes ☑ No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PIMENTEL. HUBERTO REV. 82 Street Address (P.O. Box Number is Not Acceptable) 1021 CUTOFF BRANCH COURT 83 **OVIEDO FL 32765** 84 City Zip Code 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, on 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 d agent and title if applicable (NOTE: Registered Agent signature required when reinstating) AND DIRECTORS 12. OFFICERS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 96/6 DELETE Change TITLE 1.1 TITLE ☐ Addition Moderator NAM AYALA, EDWIN 1.2 NAME cruz, samuel 1006 STOUT COURT STREET ADDRESS 1.3 STREET ADDRESS 4624 Souther Blub. OVIEDO FL 32765 ORL. FL. 32617 CITY: ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE lice-moderator Addition NAMI GONZALEZ, RAFAEL Garcia, luz e. 2.2 NAME 1592 THORNHILL CIRCLE 2471 LAKE HELEN OFTEN STREET ADDRESS 2.3 STREET ADDRESS **OVIEDO FL 32765** DUTONA, FL 82788 DITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TIBLE 3.1 TITLE ALLS . ANCIANOS Addition CAMACHO, RAQUEL NAME 3 2 NAME ruera, Juan 1755 WILLA CIRCLE STREET ADDRESS 3.3 STREET ADDRESS 1102 VIGIN PALMA WAY WINTER PARK FL 32792 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Addition TITLE Ples. Finanzas NAME NIEVES, ZAIDA COLLAZO, MANUEL BYS N. JERICO DN. 4. 2 NAME 13501 GLAPSER AVE STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP ORLANDO FL 32829 4.4 CITY - ST- ZIP CASSLUSERM, FL. 32707 ☐ DELETE TITLE 5.1 TITLE ☐ Change \_\_\_ Addition SANCHEZ, MILAGROS NAME 5.2 NAME

6.4 CITY-ST-ZIP 14. I do 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 mustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if ch

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST- ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CiTY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

4601 TIFFANY WOODS CIRCLE

11173 SLYVAN POND CIRCLE

**OVIEDO FL 32765** 

JIMENEZ, WILLIAM

ORLANDO FL 32825

S

☐ DELETE

Change

Addition

**FILED** 

Mar 04 1997 8:00am

Secretary of State