Addition

Addition

FILE	NOW:	<b>FILING</b>	FEE IS	\$61.25
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NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Katherine Harris,

Secretary of State

DIVISION OF CORPORATIONS 1999

DOCUMENT # 1. Corporation Name n

Independent Christian Church of the

Hispanic Community Inc

1713 Beck Aw Panama Cuty F1 32405

Principal Place of Business

Marling Address

1713 Beck ans Panama City Florida 32405

	,		
2.	Principal Place of Business	2a. Mailing Addres	s
21		26	i.
	Suite, Apt. #, etc.	Suite, Apt. #, el	lc.
22		27	
	City & State	City & State	
23		28	
1	Zip Country	Zip	Country
24	25	29	30

FILED 99 I'MR 24 PI 12: 1/1 SHOPELY VENTESTATE TALLAMASSEE, FLORIDA

3. Date Incorporated or Qualifed 989 i 1990

700002826007---6 -04/01/99--01036--010 \*\*\*\*\*78.00 \*\*\*\*\*70.00

Suite, Apt.	#, etc.	Suite Apt #, €	etc.			4. FEI Number 59 - 30 46676 Applied For 77 - 02 - 0.3286 67 Not Applicable	İ
Gity & State	8	City & State				5. Certificate of Status Desired	ĺ
Zip	Country 25	Z <sub>i</sub> p	Gouii	ntry		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees	
· <u>· · · · · · · · · · · · · · · · · · </u>	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent	
1	- 1\0			81	Name		İ
	usoternand			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
1509	FBtu are 1)			83		· · · · ·	
Rman	~ lity >10 324	05		84	City	FL 85 Zip Code	
office or r	to the provisions of Sections 617.050, egistered agent, or both, in the State of familiar with, and accept the obliga	of <b>Fl</b> orida. Such change	was authorized	by th	riamed cor he corporat	rporation submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or phyted name of registered agen	t and the if applicable	(NOTE Registered	Agent	signature requir	ired when reinstaturg) DATE	ć
12.	OFFICERS AN	D DRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	3
TITLE	Domingo Hern	pole ? [IDEL	ETE 117(	LF	$\sim$	astor TXMIXO Hernor Aspage [] Addition	1
NAME	,509 Foster AUC	· · · · · · · · · · · · · ·	1.2 NA	ME	1.3	Last Last	1
STREET ADDRESS		,	1.3 \$1	REETA	ADDRESS \	1509 Ferier hue 11	إ
CITY-ST-ZIP	Panama City F1 3	2405		TY-\$1-	200	1 Bosana Coly \$1 35-105	١
TITLE	Nadalia Herhande	> ARPOSTICE	ETE 21TH	LE	1	Julatic Herrandez [] Change [] Addition	
NAME	1509 Foster Ave		22 NA	ME	<u> </u>	TPORSLILL IN Th	ĺ
STREET ADDRESS		_	2351	REETA	ADDRESS	ISON FERSTE PRODE	ĺ
CITY-ST-ZIP	linamally F1 3240	5		IY-Sİ	-ZIP	11 / Signature At Grant Flow of The	
TITLE	Ma de Hannand	[108]	ETE 317"	ŢĽ	\	tricker thermore [] Addition	
NAME	Hayde Hernmo	5-Secret	art 32NA		-	consterne " T"	
STREET ADDRESS	DUNY HEVITANCIE Z	-01	J 33 ST	REELA	ADDRESS 1	1509 tostor Arway 11	
CITY-ST-ZIP	Chipley Fla 3042	Fine	· · · · · · · · · · · · · · · · · ·	TY-SI	:ZIP	TOWNS CITY TO Addition	l
w.w. &		) I DE1	E 1  ■ 1 ( T)	n C		T FEMALOS I FACILION I	

64 CITY-ST-ZIP CITY-ST-ZIP 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 tegal 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 or Block 1

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4 2 NAME

51 THLE

5 2 NAME

61 TITLE

62 NAME

[ ] DELETE

[] DELETE

[] DELETE

SIGNATURE:

STREET ADDRESS

TREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

#ITLE

IAME

TITLE

NAME

E OF SIGNING OFFICER OR DIRECTOR

2/11/19 1-850-872 0369

[] Change