

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43799

Entity Name: CASA DE ORACION OF MELBOURNE, INC.

FILED
Jan 13, 2004
Secretary of State

Current Principal Place of Business:

1510 BOTTLEBURST DRIVE NE
PALM BAY, FL 32905 US

New Principal Place of Business:

Current Mailing Address:

1510 BOTTLEBURST DRIVE NE
PALM BAY, FL 32905 US

New Mailing Address:

FEI Number: 59-3071190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELGADO, KENNETH W.
154 ANGELO RD SE
PALM BAY, FL 32909 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: STD () Delete
Name: DELGADO, BETZABE
Address: 154 ANGELO RD 56
City-St-Zip: PALM BAY, FL

Title: VPD () Delete
Name: SHAW, LEELAND
Address: 457 BIRCH AVENUE
City-St-Zip: PALM BAY, FL

Title: PD () Delete
Name: DELGADO, KENNETH REV.
Address: 154 ANGELO ROAD SE
City-St-Zip: PALM BAY, FL

Title: TD () Delete
Name: BONILLA, JASON
Address: 1812 GLENRIDGE ST. NW
City-St-Zip: PALM BAY, FL 32907

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: SHAW, LEELAND
Address: 214 W. PITTSBURGH PLACE
City-St-Zip: BROKEN ARROW, OK 74012

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

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

Title: D () Change (X) Addition
Name: SHAW, THOMAS S REV
Address: 5675 OLD ROME PARK
City-St-Zip: LEBANON, TN 37087

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: KENNETH W. DELGADO

PD

01/13/2004

Electronic Signature of Signing Officer or Director

Date