

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43799

FILED
May 02, 2006
Secretary of State

Entity Name: CASA DE ORACION OF MELBOURNE, INC.

Current Principal Place of Business:

1510 BOTTLEBRUSH DRIVE NE
PALM BAY, FL 32905 US

New Principal Place of Business:

Current Mailing Address:

1510 BOTTLEBRUSH 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 ()**
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:

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 SE
City-St-Zip: PALM BAY, FL 32909

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

Title: PD () Delete
Name: DELGADO, KENNETH REV.
Address: 154 ANGELO ROAD SE
City-St-Zip: PALM BAY, FL 32909

Title: TD () Delete
Name: BONILLA, JASON
Address: 1520 BOTTLEBRUSH DR. NE, #9
City-St-Zip: PALM BAY, FL 32905

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: REV. KENNETH DELGADO

PD

05/02/2006

Electronic Signature of Signing Officer or Director

Date