

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000776

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: IGLESIA CONFRATERNIDAD CRISTIANA DE LEISURE CITY, INC.

**Current Principal Place of Business:**

16325 SW 288TH ST  
HOMESTEAD, FL 33033

**New Principal Place of Business:**

**Current Mailing Address:**

9460 MONTEGO BAY DR  
MIAMI, FL 33189

**New Mailing Address:**

FEI Number: 65-0145695      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HERNANDEZ, ALVARO REV.  
9460 MONTEGO BAY DR  
MIAMI, FL 33189 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: P ( ) Delete  
Name: HERNANDEZ, ALVARO REV.  
Address: 9460 MONTEGO BAY DR  
City-St-Zip: MIAMI, FL 33189

Title: T ( ) Delete  
Name: LEMUS, JAMILE  
Address: 12421 SW 192 TER  
City-St-Zip: MIAMI, FL 33172

Title: S ( ) Delete  
Name: MOJICA, MILAGRO  
Address: 29720 SW 158TH PL  
City-St-Zip: HOMESTEAD, FL 33033

Title: D ( ) Delete  
Name: DAVALOS, JOSE  
Address: 12023 SW 271 TERR  
City-St-Zip: HOMESTEAD, FL 33032

Title: D ( ) Delete  
Name: MARQUEZ, ANGEL L  
Address: 30041 SW 154TH AVE  
City-St-Zip: LEISURE CITY, FL 33033

**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: D (X) Change ( ) Addition  
Name: DAVALOS, JOSE  
Address: 18950 SW 354TH ST  
City-St-Zip: FLORIDA CITY, FL 33034

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

I hereby certify that the information supplied with this filing does not qualify 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: ANGEL MARQUEZ

D

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date