

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2005 08:00 AM
Secretary of State

DOCUMENT # N93000001358

1. Entity Name
IGLESIA BAUTISTA EL CAMINO, INC.



Principal Place of Business
**5815 CORNELIA AVE
ORLANDO, FL 32807 US**

Mailing Address
**1101 SUPERIOR CT
WINTER SPRINGS, FL 32708 US**

DO NOT WRITE IN THIS SPACE



03152005 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-3157865

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TELLEZ, CARLOS
7325 KADEL WAY
ORLANDO, FL 32822**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	TELLEZ, CARLOS
STREET ADDRESS	7325 KADEL WAY
CITY-ST-ZIP	ORLANDO, FL 32822
TITLE	D
NAME	MELIAN, CECILIO
STREET ADDRESS	213 APEX POINT, UNIT 111
CITY-ST-ZIP	CASSELBERRY, FL 32707
TITLE	D
NAME	GUTIERREZ, JOSE
STREET ADDRESS	1324 FOXTON LANE
CITY-ST-ZIP	OVIEDO, FL 32765
TITLE	D
NAME	VARGAS, ISMAEL
STREET ADDRESS	7920 VIRGINIA PINE CT
CITY-ST-ZIP	ORLANDO, FL 32822
TITLE	T
NAME	IGLESIAS, JESUS S
STREET ADDRESS	1101 SUPERIOR COURT
CITY-ST-ZIP	WINTER SPRINGS, FL 32708
TITLE	D
NAME	RODRIGUEZ, RIGOBERTO
STREET ADDRESS	627 PERSHING DRIVE
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32701

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04/12/05-80010-002 70.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jesus Iglesias **JESUS S. IGLESIAS** 4/1/05 (407)366-8156