

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008 8:00 am
Secretary of State

03-20-2008 90027 007 ****61.25

DOCUMENT # N93000001581

1. Entity Name
**FILIPINO INTERNATIONAL CHRISTIAN CHURCH,
INCORPORATED**



Principal Place of Business
**2550 S GOLDENROD ROAD
ORLANDO, FL 32822 US**

Mailing Address
**2550 S GOLDENROD ROAD
ORLANDO, FL 32822 US**

50000220



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02232008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-3128803

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ELARDO, DANILO
2550 S GOLDENROD ROAD
ORLANDO, FL 32822**

Name **BUNDANG, RACHEL**
Street Address (P.O. Box Number is Not Acceptable)
106 EAST WYNHAM CT.

City **LONGWOOD** FL Zip Code **32779**

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]* **RACHEL BUNDANG, SECRETARY** **Feb 24, 2008**
(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, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
NAME **ARANZAMENDEZ, DANILO C**
STREET ADDRESS **3504 EXETER COURT**
CITY-ST-ZIP **ORLANDO, FL**

TITLE **C/D** ☐ Change ☒ Addition
NAME **CUBIT, JOHNNY**
STREET ADDRESS **537 CEDAR FOREST CIRCLE**
CITY-ST-ZIP **ORLANDO FL 32828**

TITLE **D** ☒ Delete
NAME **DANILO, ELARDO**
STREET ADDRESS **2550 S GOLDENROD ROAD**
CITY-ST-ZIP **ORLANDO, FL**

TITLE **T/D** ☐ Change ☒ Addition
NAME **LACSON, BETTY**
STREET ADDRESS **7100 PASTURELANDS PLACE**
CITY-ST-ZIP **WINTER GARDEN FL 34787**

TITLE **D** ☒ Delete
NAME **LIM, ARNALDO P**
STREET ADDRESS **306 LAKE PARK TRAIL**
CITY-ST-ZIP **OVIDO, FL 32765**

TITLE **S/D** ☐ Change ☒ Addition
NAME **BUNDANG, RACHEL**
STREET ADDRESS **106 E. WYNHAM CT.**
CITY-ST-ZIP **LONGWOOD FL 32779**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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]* **RACHEL BUNDANG** **Feb 24, 2008** **619 8642776**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #