2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2007 8:00 am
Secretary of State
02-15-2007 90054 048 ****61.25

DOCUMENT # N94000003655

1. Entity Name
THE OLD PATH CHRISTIANS CHURCH, INC.

Principal Place of Business	Mailing Address
1812 37TH ST. ORLANDO, FL 32839	1812 37TH ST. ORLANDO, FL 32839

02012007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3375776 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MENDOZA, THOMAS
1812 37TH ST.
ORLANDO, FL 32839

7. Name and Address of New Registered Agent

Name: Lydia Colon de Mendoza
Street Address (P.O. Box Number is Not Acceptable): 1812 37 STREET
City: ORLANDO FLORIDA **FL** Zip Code: 32839

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: Lydia Colon de Mendoza DATE: 2/10/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PT MENDOZA, THOMAS 1812 37 ST ORLANDO, FL 32839	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT COLON-MENDOZA LYDIA 1812 37 STREET ORLANDO FL. 32839	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SOUFFRONT, ANTHONY 3809 SOUTH TAMPA AVE ORLANDO, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T IPOY OCTAVIO 5421 MOROMIS CIR. ORLANDO FL. 32829	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GALLEGO, DELIA 4517 BELVEDERE ST ORLANDO, FL 32809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RAMIREZ, DEIDAD 5291 LIGHTHOUSE RD. ORLANDO, FL 32808	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PERZEZ, JUAN 106 WILLSHAPE ST. ORLANDO, FL 32707	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Lydia Colon de Mendoza Date: 2/10/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #