

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003655

FILED
Feb 23, 2009
Secretary of State

Entity Name: THE OLD PATH CHRISTIANS CHURCH, INC.

Current Principal Place of Business:

1812 37TH ST.
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

1812 37TH ST.
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 59-3375776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLON DE MENDOZA, LYDIA
1812 37TH ST.
ORLANDO, FL 32839 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: PT () Delete
Name: MENDOZA, THOMAS
Address: 1812 37 ST
City-St-Zip: ORLANDO, FL 32839

Title: T () Delete
Name: SOUFFRONT, ANTHONY
Address: 3809 SOUTH TAMPA AVE
City-St-Zip: ORLANDO, FL

Title: S () Delete
Name: GALLEGO, DELIA
Address: 4517 BELVEDERE ST
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: RAMIREZ, DEIDAD
Address: 5291 LIGHTHOUSE RD.
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: PERZEZ, JUAN
Address: 106 WILLSHAPE ST.
City-St-Zip: ORLANDO, FL 32707

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 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: LYDIA COLON MENDOZA

MS.

02/23/2009

Electronic Signature of Signing Officer or Director

Date