FILED 2008 NOT-FOR-PROFIT CORPORATION Jul 10, 2008 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # N95000003309** 07-10-2008 90015 028 ****70 00 PRIMERA IGLESIA BAUTISTA HISPANA DE BRANDON. Principal Place of Business Mailing Address 1600 N. TAYLOR ROAD 1600 N. TAYLOR ROAD BRANDON, FL 33510-2536 US BRANDON, FL 33510-2536 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07082008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Numbe 65-0597934

Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ORTIZ DR., DANIEL REV. 1600 N. TAYLOR ROAD Street Address (P.O. Box Number is Not Acceptable) BRANDON, FL 33510-2536 City Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rematating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be \Box Trust Fund Contribution. Fiorida Department of State Added to Fees Due by September 12, 2008 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE PD TITLE ☐ Channe ☐ Addition Delete ORTIZ DR., DANIEL REV. NAME NAME STREET ADDRESS STREET ADDRESS 1600 N. TAYLOR RD BRANDON, FL 33510 CITY-ST-ZIP CITY-ST-71P SD SD TITLE Change ☐ Addition TITLE ☐ Delete Sandra E. Ortiz ORTIZ, SANDRA E NAME NAME 5610 Granada Blvd #101 2604 BERMUDA LAKE DRIVE, APT. 203 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRANDON, FL 33510 CITY-ST-ZIP Tampa, FL 33613 TITLE **Change** Addition Delete TITLE Evelyn E. Ortiz GOODEN, FREDERICK M. NAME NAME 2604 BERMUDA LAKE DRIVE, APT. 203 STREET ADDRESS 5202B Lemon Ave. STREET ADDRESS CITY-ST-ZIP BRANDON, FL 33510 CITY-ST-7IP Seffner, FL 33584 Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 the empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/8/08 (813)546-4374