

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004198

FILED  
Jan 25, 2011  
Secretary of State

**Entity Name:** THE NEW HARVEST SPANISH CHRISTIAN CHURCH ASSEMBLY OF GOD, INC.

**Current Principal Place of Business:**

6660 PEMBROKE ROAD  
PEMBROKE PINES, FL 33023 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 8324  
PEMBROKE PINES, FL 33084 US

**New Mailing Address:**

FEI Number: 65-0606284

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ACOSTA, DANIEL J  
6212 DEWEY ST.  
HOLLYWOOD, FL 33023 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: DP  
Name: ACOSTA, DANIEL J  
Address: 6212 DEWEY ST.  
City-St-Zip: HOLLYWOOD, FL 33023

Title: DS  
Name: ACOSTA, JOANNI  
Address: 6212 DEWEY ST  
City-St-Zip: HOLLYWOOD, FL 33023

Title: D  
Name: MEJIA, PAULINO  
Address: 3371 SW 16TH CT  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D  
Name: MUNOZ, ELBA  
Address: 521 SW 72 AVE  
City-St-Zip: PEMBROKE PINES, FL 33023

Title: DT  
Name: NEREIDA, SANTOS  
Address: 7170 SW 15TH ST  
City-St-Zip: HOLLYWOOD, FL 33023

Title: DVP  
Name: LOPEZ, SARA  
Address: 6212 DEWEY ST.  
City-St-Zip: HOLLYWOOD, FL 33023

I hereby 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 all other like empowered.

SIGNATURE: DANIEL J ACOSTA

DP

01/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date