

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005843

FILED
May 05, 2009
Secretary of State

Entity Name: CAMINO AL CIELO DE LA BIBLIA ABIERTA, INC.

Current Principal Place of Business:

495 E LANCASTER RD
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

495 E LANCASTER RD
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 59-3367919 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COLON, RAUL
495 E. LANCASTER RD.
ORLANDO, FL 32809 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: P () Delete
Name: COLON, RAUL
Address: 495 E LANCASTER RD
City-St-Zip: ORLANDO, FL 32809

Title: AD () Delete
Name: COSME, MARGARITA
Address: 9505 2ND AVE
City-St-Zip: ORLANDO, FL 32824

Title: S () Delete
Name: RIVERA, ANNA L
Address: 1331 41ST STREET
City-St-Zip: ORLANDO, FL 32839

Title: AD () Delete
Name: GUERRERO, COSME
Address: 9505 2ND AVE
City-St-Zip: ORLANDO, FL 32824

Title: T () Delete
Name: COLON, ANNA C
Address: 495 E. LANCASTER RD.
City-St-Zip: ORLANDO, FL 32809

Title: AD () Delete
Name: ROJAS, ALEXANDRA
Address: 5720 PGA BLVD APT 511
City-St-Zip: ORLANDO, FL 32839

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
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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: RAUL COLON

PATR

05/05/2009

Electronic Signature of Signing Officer or Director

Date