

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002517

FILED
Jan 30, 2009
Secretary of State

Entity Name: COMUNIDAD MISIONERA CARISMATICA SEMBRADORES DE LA PALABRA INC.

Current Principal Place of Business:

600 FIELD CLUB CIR
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

600 FIELD CLUB CIR
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 59-3374356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, PABLO
310 1/2 SO. BUMBY
ORLANDO, FL 32803 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: PD () Delete
Name: CARTAGENA, ORLANDO
Address: 600 FIELD CLUB CIR
City-St-Zip: CASSELBERRY, FL 32707

Title: VPD () Delete
Name: CRUZ, JUAN
Address: P.O. BOX 196416
City-St-Zip: WINTER SPRINGS, FL 327196416

Title: T () Delete
Name: CARTAGENA, CARMEN
Address: 600 FIELD CLUB CIR
City-St-Zip: CASSELBERRY, FL 32707

Title: T () Delete
Name: CRUZ, IDA L
Address: P.O. BOX 196416
City-St-Zip: WINTER SPRINGS, FL 327196416

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:

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: JUAN E CRUZ

VPD

01/30/2009

Electronic Signature of Signing Officer or Director

Date