

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003120

FILED
Jan 15, 2009
Secretary of State

Entity Name: PRIMERA IGLESIA BAUTISTA HISPANA DE PALM COAST, INC.

Current Principal Place of Business:

5500 BELLE TERRE PARKWAY
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

5500 BELLE TERRE PARKWAY
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 59-3392425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARGAS, FRANCISCO REV
14 PINE ASH LANE
P
PALM COAST, FL 32164 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: D () Delete
Name: VARGAS, FRANCISCO REV
Address: 14 PINE ASH LANE
City-St-Zip: PALM COAST, FL 32164

Title: TR () Delete
Name: MENENDEZ, PEDRO
Address: 13 BRADMORE LN
City-St-Zip: PALM COAST, FL 32137

Title: TRS () Delete
Name: VAZQUEZ, MAGDALENA
Address: 32 PINE CROFT LN
City-St-Zip: PALM COAST, FL 32164

Title: TT () Delete
Name: ROMAN, ABISAI
Address: 43 CARLSON LN
City-St-Zip: PALM COAST, FL 32137

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: MAGDALENA VAZQUEZ

TREA

01/15/2009

Electronic Signature of Signing Officer or Director

Date