

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003672

FILED
Mar 05, 2009
Secretary of State

Entity Name: "PRINCE OF PEACE" CHRISTIAN CHURCH INC.

Current Principal Place of Business:

7506 E CAUSEWAY BLVD
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 89486
TAMPA, FL 336890408 US

New Mailing Address:

FEI Number: 59-3397913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REYES, ALFREDO
1404 GLENMERE DR
BRANDON, FL 33511 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: REYES, ALFREDO
Address: 1404 GLENMERE DR
City-St-Zip: BRANDON, FL 33511

Title: VD () Delete
Name: DOMINGUEZ, MILAGROS
Address: 1404 GLENMERE DR
City-St-Zip: BRANDON, FL 33511

Title: TD () Delete
Name: MELENDEZ, HECTOR
Address: 3103 CLIFFORD SAMPLE DR
City-St-Zip: TAMPA, FL 33619

Title: CD () Delete
Name: REYES, FREDDY
Address: W-8 ONIX VALLE DE CERRO GORDO
City-St-Zip: BAYAMON, PR 00957

Title: MD () Delete
Name: REYES, NELSON
Address: 12801 ODENS BEQUEST DR
City-St-Zip: BOWIE, MD 20720

Title: SD () Delete
Name: VAZQUEZ, SANDRA A
Address: 4701 MUSKOGEE CT #204
City-St-Zip: TAMPA, FL 33610

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: LEBRON, SAUL
Address: 3207 STAR ST.
City-St-Zip: TAMPA, FL 33605

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MD (X) Change () Addition
Name: REYES, NELSON
Address: 6708 MARTINDALE CT.
City-St-Zip: BOWIE, MD 20720

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: ALFREDO REYES

PD

03/05/2009

Electronic Signature of Signing Officer or Director

Date