

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001636

FILED  
Mar 06, 2008  
Secretary of State

**Entity Name:** IGLESIA BAUTISTA HISPANA DE MANDARIN, INC.

**Current Principal Place of Business:**

1600 ASHLAND ST  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

1600 ASHLAND ST  
JACKSONVILLE, FL 32207

**New Mailing Address:**

**FEI Number:** 59-3436670

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ESQUEDA, DAVID  
4563 CRYSTAL BROOK WAY  
JACKSONVILLE, FL 32224 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: RASH, DOUGLAS  
Address: 2451 THE WOODS DR.  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: TR ( ) Delete  
Name: MELO, JOSE  
Address: 2860 SUTTON EAST CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: TR ( ) Delete  
Name: OSORIO, LUIS  
Address: 1750 SHERIDAN ST  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: V ( ) Delete  
Name: ROSAS, FRANK  
Address: 10787 DULAWAN DR.  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: S ( ) Delete  
Name: RASH, NICKY  
Address: 2451 THE WOODS DR.  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: TR ( ) Delete  
Name: SAENZ, FERNANDO A REV.  
Address: 8832 CANOPY OAKS DR.  
City-St-Zip: JACKSONVILLE, FL 32256 US

**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:

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: DAVID ESQUEDA

MR.

03/06/2008

Electronic Signature of Signing Officer or Director

Date