

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003183

FILED
Feb 10, 2009
Secretary of State

Entity Name: IGLESIA PENTECOSTAL MANANTIAL DE VIDA, INC.

Current Principal Place of Business:

649 OAKGROVECHURCH ROAD
LUMBERTON, NC 28360 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1142
LUMBERTON, NC 28359

New Mailing Address:

185 CYNTHIA DR
LUMBERTON, NC 28360

FEI Number: 59-3451472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, LISBEL M
16006 CHICHESTER CT
CLERMONT, FL 34714 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: RODRIGUEZ, ROBERT A
Address: 185 CYNTHIA DRIVE
City-St-Zip: LUMBERTON, NC 34714

Title: T () Delete
Name: CASTRO-ALICEA, CARMEN
Address: 184 WINDY DRIVE
City-St-Zip: LUMBERTON, NC 28360

Title: S () Delete
Name: RODRIGUEZ, LISBEL M
Address: 16006 CHICHESTER COURT
City-St-Zip: CLERMONT, FL 34714

Title: T () Delete
Name: DE LA CRUZ, ROSITA
Address: 220 WINDY DRIVE
City-St-Zip: LUMBERTON, NC 28360

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: ROBERT A RODRIGUEZ

P

02/10/2009

Electronic Signature of Signing Officer or Director

Date