2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N97000005835

1. Entity Name
IGLESIA CRISTIANA DE DELTONA (DISCIPLES OF CHRIST) INC.

FILED
Jul 09, 2008 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
1596 ENTERPRISE OSTEEN ENTERPRISE, FL 32725 US	1596 ENTERPRISE OSTEEN ENTERPRISE, FL 32725 US

07032008 No Chg-NP CR2E037 (4/06)

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4. FEI Number
59-3420362
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORTES, DAVID
2972 PORTSMOUTH ST
DELTONA, FL 32738

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	MD
NAME	JESUS, MORALES R
STREET ADDRESS	2431 GREENBRIER ST
CITY-ST-ZIP	DELTONA, FL 32738
TITLE	T
NAME	RODRIGUEZ, HECTOR
STREET ADDRESS	3114 LYNNHAVEN ST
CITY-ST-ZIP	DELTONA, FL 32738
TITLE	FSD
NAME	WANDA, MORALES
STREET ADDRESS	2431 GREENBRIER ST.
CITY-ST-ZIP	DELTONA, FL 32738
TITLE	T
NAME	DUGUE, JOSE
STREET ADDRESS	1726 PINE AVE
CITY-ST-ZIP	DELAND, FL 32724
TITLE	MOE
NAME	MORALES, JESUS
STREET ADDRESS	2431 GREENBRIAR ST.
CITY-ST-ZIP	DELTONA, FL 32738
TITLE	SEC.
NAME	MORALES, WANDA
STREET ADDRESS	2431 GREENBRIAR ST.
CITY-ST-ZIP	DELTONA, FL 32738

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 7/5/08 407-325-8756
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #