

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005 8:00 am
Secretary of State

01-28-2005 90024 014 ****70.00

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DOCUMENT # N97000006865 1. Entity Name IGLESIA DEL NAZARENO DE WINTER PARK, INC.					
Principal Place of Business 1220 FORMOSA AVENUE WINTER PARK, FL 32789			Mailing Address 1220 FORMOSA AVENUE WINTER PARK, FL 32789		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-3158302				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GUZMAN, ANGEL M 1220 FORMOSA AVENUE WINTER PARK, FL 32789			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGURZ, CARLOS 1312 WOODFIELD OAKS DR APOKA, FL 32703		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, CARLOS S. NORTHLAKE BLVD. APT. 1062 ALTAMONTE SPRING FL 32701	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOSADO, LYDIA 4515 ADANSON ST ORLANDO, FL 32804		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RODRIGUEZ, FRANCISCO 5903 LEMOS CT ORLANDO, FL 32808		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T RODRIGUEZ, FRANCISCO 5903 Lemos, Ct. ORLANDO, FL 32808	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ACOSTA, IRMA I 6758 MERITMOOR CIR. ORLANDO, FL 32818		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOZMAN, ARIOSKA 9460 TURKEY OAK RD ORLANDO, FL 32817		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUZMAN, Ariuska 9460 Turkey Oak Rd. ORLANDO, FL 32817	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUBIO, SARY 1176 PASEO DEL MAR/ MARBELLA CLUB CASSELBERRY, FL 32707		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUZMAN, Angel M. 9460 Turkey Oak Rd. ORLANDO, FL 32817	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Angel M. Guzman</u> ANGEL M. GUZMAN			1-23-05 407 677-0136		