

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90116 035 ****61.25

DOCUMENT # N98000000683

1. Entity Name
JESUCRISTO CAMINO DE LUZ INC.



Principal Place of Business
1336 E. VINE ST.
KISSIMMEE, FL 34744 US

Mailing Address
2162 GRANGER AVE
KISSIMMEE, FL 34746 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01182006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-3491480

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LUCENA, JOHN
517 PEPPERMILL CIRCLE
KISSIMMEE, FL 34758

Name John Lucena

Street Address (P.O. Box Number is Not Acceptable)

2162 Granger Ave

City

Kissimmee

FL

Zip Code

34746

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/18/06

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
LUCENA, JOHN
517 PEPPERMILL CIRCLE
KISSIMMEE, FL 34758 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
GOMEZ, JUAN
8057 ELM STONE CIRCLE
ORLANDO, FL 32809 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
DE LA ROCHA, AMPARO
506 ROYAL PALM
KISSIMMEE, FL 34743 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
SOLARTE, SILVIA
517 PEPPERMILL CIRCLE
KISSIMMEE, FL 34758 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
SCHAMBON, PEDRO
2309 INDIAN TOWN D TRAIL
KISSIMMEE, FL 34746 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
JIMENEZ, ALVARO
145-25 GATEWAY POINT CIRCLE
ORLANDO, FL 32824 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2162 GRANGER AVE
KISSIMMEE, FL 34746 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2162 GRANGER AVE
KISSIMMEE, FLORIDA 34746 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MARILYN CALIXTO
1336 E VINE ST
KISSIMMEE, FLORIDA 34746 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/06

407-580111

Daytime Phone #