

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002421

FILED  
Jul 07, 2006  
Secretary of State

Entity Name: TEMPLO CRISTIANO A.D., INC.

## Current Principal Place of Business:

14690 DR M.L. KING JR. BLVD  
DOVER, FL

## New Principal Place of Business:

14690 DR M.L. KING JR. BLVD  
DOVER, FL 33527 US

## Current Mailing Address:

PO BOX 159  
DOVER, FL 335270159

## New Mailing Address:

PO BOX 159  
DOVER, FL 335270159 US

FEI Number: 59-3527662      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

CORREA, JOSE L  
207 BELFORT PLACE  
VALRICO, FL 33594 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: PT ( ) Delete  
Name: CORREA, JOSE L  
Address: 207 BELFORT PLACE  
City-St-Zip: VALRICO, FL 33594

Title: V ( ) Delete  
Name: CORREA, LOYDA E  
Address: 207 BELFORT PL.  
City-St-Zip: VALRICO, FL 33594

Title: T ( ) Delete  
Name: ALVARDO, MARISOL  
Address: 3979 BUTTON BUSH CIRCLE  
City-St-Zip: LAKE LAND, FL 33811

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: VAZQUEZ, ANN M  
Address: 5414 BEVERLY RISE BLVD.  
City-St-Zip: LAKE LAND, FL 33813 US

Title: S ( ) Change (X) Addition  
Name: VILLANUEVA, JOANNA  
Address: 4516 TINA LANE  
City-St-Zip: PLANT CITY, FL 33663 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSE L. CORREA

PT

07/07/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date