2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002924

Entity Name: CHRISTIAN CENTER NEW VISION, INC

FILED Aug 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 75 N BUMBE AVE ORLANDO, FL 32803 US **Current Mailing Address: New Mailing Address:** 75 N BUMBE AVE ORLANDO, FL 32803 US FEI Number: 59-3529322 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: Name and Address of New Registered Agent: VARGAS, MILAGROS 3278 CANOE CREEK RD SUITE 1 SAINT CLOUD, FL 34772 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PPD () Delete () Change () Addition DELA ROSA, DIOGENES Name: Name: 5808 WILLOWBUD COURT Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: () Delete Title: () Change () Addition DE LA ROSA, DOLORES Name: Name: Address: 5808 WILLOWBUD COURT Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: () Delete Title: (X) Change () Addition OBDULIO, CALO Name: OBDULIO, CALO Name: 2513 RIO PINELLAS BLVD 2513 RIO PINELLAS BLVD Address: Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: ORLANDO, FL 32822 Title: () Delete Title: () Change () Addition Name: SALAZAR, CARMEN Name: Address: 5445 LEEHIGH AVE. Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: () Delete Title: (X) Change () Addition DE LA ROSA, ESPERANZA SANCHEZ, SONIA Name: Name: 2513 RIO PINAR LKS BLVD 1218 RUSTIC DR. Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32822 Title: (X) Delete Title: () Change () Addition RODRIGUEZ, MELANIA Name: Name: Address: 2029 GARWOOD DR. Address: ORLANDO, FL 32822 City-St-Zip: 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: DIOGENES DELAROSA PPD 08/08/2009