2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N98000003096

Entity Name: IGLESIA PENTECOSTAL ESPIRITU SANTO, INC.

Current Principal Place of Business:

285 MARION OAKS LANE
OCALA, FL 34473

New Principal Place of Business:

Current Mailing Address:

15249 SW 39 CIR
OCALA, FL 34473

New Mailing Address:

FEI Number: 59-3488965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DE LA ROSA, ANDRES
15249 SW 39 CIR
OCALA, FL 34473 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: SD ( ) Delete
Name: DE LA ROSA, MARIA
Address: 15249 SW 39 CIR
City-St-Zip: OCALA, FL 34473

Title: TD ( ) Delete
Name: RAMOS, ANA
Address: 2856 SW 161 LP
City-St-Zip: OCALA, FL 34473

Title: PD ( ) Delete
Name: ORTIZ, MYRIAM
Address: 15249 SW 39 CIR
City-St-Zip: OCALA, FL 34473

Title: D ( ) Delete
Name: DE LA ROSA, ANDRES
Address: 15249 SW 39 CIR
City-St-Zip: OCALA, FL 34473

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: MARIA M DELAROSA MS 04/15/2009

Electronic Signature of Signing Officer or Director — Date