2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## **FILED** May 03, 2007 08:00 A Secretary of State DOCUMENT # N98000003469 : 1. Entity Name IGLESIA CRISTIANA CANDELERO DE ORO, INC. Principal Place of Business Mailing Address 4716 S ORANGE AVE ORLANDO FL 32806 4716 S ORANGE AVE ORLANDO FL 32806 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-3514700 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Namo RODRIGUEZ, JOSE R 11 SILVER SWAN CT Street Address (P.O. Box Number is Not Acceptable) KISSIMMEE FL 34743 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Make Check Pavable to 9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 IIILE DIR ☐ Delete TITLE ☐ Addition ☐ Change U00000760600 NAME RODRIGUEZ, JOSE R 05/25/07-80019-018 61.25 STREET ADDRESS 11 SILVER SWAN CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL 34743-3811 FILLE ☐ Defete Change ☐ Addition NAME NIEVES, INES STREET ADDRESS STREET ADDRESS 1542 SILVERSMITH PL CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32818 Delete Change ☐ Addition DIR NAME NAME SERRANO, JOSE A STREET ADDRESS STREET ADDRESS 1117 SUMMER LAKES DR CITY-SI-ZIP CITY-ST-ZIP ORLANDO FL 32835 TIFLE ☐ Delete Change ☐ Addition ШЦ NAME NAME RODRIQUEZ, RUBEN STREET ADDRESS 6159 ROB BURG AVE STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP ORLANDO FL 32809 THE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE Delete Change THLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

04/29/07

407-348-6183