

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003687

FILED
May 03, 2008
Secretary of State

Entity Name: IGLESIA CRISTO TE AMA INC.

Current Principal Place of Business:

1900 SR 64 W.
AVON PARK, FL 33825

New Principal Place of Business:

Current Mailing Address:

4221 CAPRI ST.
SEBRING, FL 33872

New Mailing Address:

FEI Number: 59-3520824 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:

GARCIA, CANDIDO
4221 CAPRI ST.
SEBRING, FL 33872 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: T () Delete
Name: CARDONA, HILDA E
Address: 2330 JACKSON HEIGHTS DR
City-St-Zip: SEBRING, FL 33872

Title: T () Delete
Name: DE LA ROSA, MARIA T
Address: 901 S FLORIDA AVE APT 17
City-St-Zip: AVON PARK, FL 33825

Title: D () Delete
Name: GARCIA, CANDIDO REV
Address: 4221 CAPRI ST
City-St-Zip: SEBRING, FL 33872

Title: S () Delete
Name: MORALES, MYRNA
Address: 11800 US 27 SOUTH
City-St-Zip: SEBRING, FL 33870

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: CANDIDO GARCIA

D

05/03/2008

Electronic Signature of Signing Officer or Director

_____ Date