2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007072

FILED Mar 13, 2006 Secretary of State

Entity Name: HISPANIC CHRISTIAN CHURCH ASSOCIATION OF CENTRAL FLORIDA INC.

Current Principal Place of Business: New Principal Place of Business:

ONE PURLIEU PLACE SUITE 270 WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

PO BOX 721235 ORLANDO, FL 32872

FEI Number: 59-3645761 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOYA, JOSE T

492 SHORT PINE CIR
ORLANDO, FL 32807 US

SANTIAGO, PANZARDI
7215 FOREST CITY RD
ORLANDO, FL 32810 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: PANZARDI 03/13/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SE () Delete Title: DE (X) Change () Addition Name: MOYA, JOSE T Name: SANTIAGO, PANZARDI

 Address:
 PO BOX 574263
 Address:
 7215 FOREST CITY RD

 City-St-Zip:
 ORLANDO, FL 328574263
 City-St-Zip:
 ORLANDO, FL 32810

Title: PD () Delete Title: PD (X) Change () Addition Name: LOPEZ, LUIS Name: LOPEZ, LUIS

 Address:
 2550 S GOLDEN RD
 Address:
 2550 S GOLDENROD RD

 City-St-Zip:
 ORLANDO, FL 32822
 City-St-Zip:
 ORLANDO, FL 32822

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 OVERSTREET, REBECCA
 Name:
 RAUL, ANDINO

 Address:
 PO BOX 450278
 Address:
 1615 ELMSTEAD

 City-St-Zip:
 KISSIMMEE, FL 34745
 City-St-Zip:
 ORLANDO, FL 32824

 Name:
 JOAQUIN, PEREZ-APONTE
 Name:
 JOAQUIN, PEREZ-APONTE

 Address:
 8670 SAVORY DR
 Address:
 1840 GOLDENROD RD

 City-St-Zip:
 ORLANDO, FL 32825
 City-St-Zip:
 ORLANDO, FL 32807

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: LUIS LOPEZ PD 03/13/2006