

2000 UNIFORM BUSINESS REPORT (UBR)

3/

DOCUMENT # 739159

1. Entity Name

IGLESIA CRISTIANA FUENTE DE PODER, ASAMBLEAS DE

Principal Place of Business

Mailing Address

521 BELVEDERE ROAD
CHURCH BUILDINGS
WEST PALM BEACH FL 33405-1228
US

P.O. BOX 7004
WEST PALM BEACH FL 33405-7004

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2367611

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

MURPHY, ADELO
108 SUN FLOWER CIRCLE
SUITE 1
ROYAL PALM BEACH FL 33405

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.

SIGNATURE

Adelo Murphy - PASTOR

Adelo Murphy

3-18-00

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MURPHY, ADELO
STREET ADDRESS 108 SUNFLOWER CIRCLE
CITY-ST-ZIP ROYAL PALM BEACH FL 33411 ☐ Delete

TITLE TD
NAME MATOS, JOSE
STREET ADDRESS 5648 ALBERT ROAD
CITY-ST-ZIP WEST PALM BEACH FL 33415 ☐ Delete

TITLE SD
NAME PRADO, VARINIA
STREET ADDRESS 2340 PALMETTO ROAD
CITY-ST-ZIP WEST PALM BEACH FL 33406 ☒ Delete

TITLE D
NAME QUINONES, BETZAIDA
STREET ADDRESS 1420 WINDORAH WAY
CITY-ST-ZIP WEST PALM BEACH FL 33405 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME De Jesus Gladys
STREET ADDRESS 309 Betetta Ct. SECRETARY
CITY-ST-ZIP West Palm Beach, FL. 33415 ☐ Change ☒ Addition

TITLE
NAME Prado, Juan Deacon
STREET ADDRESS 2425 Florida Mango Rd.
CITY-ST-ZIP West Palm Bch. FL. 33406 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Adelo Murphy

3-18-00

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

CR2E037 (9/99)