2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#739159

FILED Mar 31, 2006 Secretary of State

Entity Name: IGLESIA CRISTIANA FUENTE DE PODER, ASAMBLEAS DE DIOS, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
CHURCH	EDERE ROAD BUILDING LM BEACH, FL	334051228 US			
Current M	lailing Addres	s:	New Maili	ng Address:	
P.O. BOX WEST PA	7004 LM BEACH, FL	33405			
FEI Number	: 59-2367611	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
SUITE 1	ADELO FLOWER CIRC ALM BEACH, FI				
	named entity s of Florida.	ubmits this statement for the p	urpose of changing i	ts registered office or registered agent, or both,	
SIGNATUI	RE:				
	Electroni	ic Signature of Registered Age	nt	Date	
OFFICER	S AND DIRECT	rors:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address:	PD () MURPHY, ADEL 108 SUNFLOWE	Delete O	ADDITION Title: Name: Address: City-St-Zip:	IS/CHANGES TO OFFICERS AND DIRECTORS () Change () Addition	
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	PD () MURPHY, ADEL 108 SUNFLOWE ROYAL PALM B TD () ROSARIO, ALBE 5218 EDENWOO	Delete O ER CIRCLE EACH, FL 33411 Delete ERTO	Title: Name: Address:		
Title: Name: Address: City-St-Zip: Title: Name: Address:	PD () MURPHY, ADEL 108 SUNFLOWE ROYAL PALM B TD () ROSARIO, ALBE 5218 EDENWOO PALM BEACH G SD () RIVERA, NANCY 1131 W FERNLE	Delete O ER CIRCLE EACH, FL 33411 Delete ERTO DD RD. ARDENS, FL 33418 Delete	Title: Name: Address: City-St-Zip: Title: Name: Address:	()Change()Addition	
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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: REV. ADELO MURPHY PD 03/31/2006