

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 765975

**Entity Name:** IGLESIA CRISTIANA "THE WAY" INC.

**Current Principal Place of Business:**

14732 SYDNEY ROAD  
DOVER, FL 33527

**Current Mailing Address:**

PO BOX 355  
SYDNEY, FL 33587 03

**FEI Number:** 59-2443076

**Certificate of Status Desired:** No

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

DELGADO, DAVID A PASTOR  
1528 SYDNEY DOVER RD  
DOVER, FL 33527 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:** DAVID A. DELGADO

03/27/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DEACON  
Name BANDA, ASCENCION  
Address 5122 MOLL ACRES DRIVE  
City-State-Zip: PLANT CITY FL 33566

Title TREASURER  
Name CARRIZO, LORENA  
Address 5012 CALHOUN RD  
City-State-Zip: PLANT CITY FL 33567

Title DEACON  
Name MELENDEZ, MARTIN  
Address 6909 DORMANY LOOP  
City-State-Zip: PLANT CITY FL 33565

Title DEACON  
Name CUEVAS, ERNESTO  
Address 4912 KEENE ROAD  
City-State-Zip: PLANT CITY FL 33566

Title ASST. TREASURER  
Name MELENDEZ, PAULA  
Address 6909 DORMANY LOOP  
City-State-Zip: PLANT CITY FL 33565

Title DEACON  
Name LORA, WALTER  
Address 4649 BELLE CHASE CIR.  
City-State-Zip: TAMPA FL 33634

Title DEACON  
Name RAMIREZ, ABDIEL  
Address 4721 SILKRUN CT.  
City-State-Zip: PLANT CITY FL 33566

*I hereby 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 all other like empowered.*

**SIGNATURE:** LORENA CARRIZO

TREASURER

03/27/2014

Electronic Signature of Signing Officer/Director Detail

Date