

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011704

FILED
Apr 27, 2011
Secretary of State

Entity Name: TABERNACULO DE ALABANZA, INC.

Current Principal Place of Business:

11020 ROSEMARY DRIVE
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

11020 ROSEMARY DRIVE
BONITA SPRINGS, FL 34135 US

New Mailing Address:

FEI Number: 27-1561779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JUAREZ, MARIO E CPA
ACCOUNTING SOLUTIONS OF SWFL, INC.
1501 S. TAMiami TRAIL, SUITE 203
FORT MYERS, FL 33908 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: PD
Name: GRAMAJO, GABRIEL
Address: 11020 ROSEMARY DRIVE
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: SD
Name: GRAMAJO, MIRNA E
Address: 11020 ROSEMARY DRIVE
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: TD
Name: RAMIREZ, ARCELIA
Address: 9241 CYPRESS DRIVE N.
City-St-Zip: FORT MYERS, FL 33967 US

Title: D
Name: RAMIREZ, ARAON
Address: 9241 CYPRESS DRIVE N.
City-St-Zip: FORT MYERS, FL 33967 US

Title: D
Name: GRAMAJO, JOSUE G
Address: 27951 QUINN STREET
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: D
Name: GASPAS, JUAN
Address: 25501 TROST BLVD
City-St-Zip: BONITA SPRINGS, FL 34135 US

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: GABRIEL GRAMAJO

PD

04/27/2011

Electronic Signature of Signing Officer or Director

_____ Date