

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 31, 2001 8:00 am**  
**Secretary of State**

01-31-2001 90297 045 \*\*\*\*61.25

**DOCUMENT # 700982**

1. Entity Name

**THE REFORMED PRESBYTERIAN CHURCH OF ORLANDO, FLO**

Principal Place of Business

Mailing Address

324 E LIVINGSTON  
 ORLANDO FL 32801

324 E LIVINGSTON  
 ORLANDO FL 32801

A0016806



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1112503

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FOREST, THOMAS H.  
 5240 BARNEGAT PT ROAD  
 ORLANDO FL 32808

Name

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

City

FL

Zip Code

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 \_\_\_\_\_

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  Delete  
 NAME FOREST, THOMAS D  
 STREET ADDRESS 1551 SACKETT CIRCLE  
 CITY-ST-ZIP ORLANDO FL 32818

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE DV  Delete  
 NAME BAILEY, SCOTT  
 STREET ADDRESS 404 JERSEY ST E  
 CITY-ST-ZIP ORLANDO FL 32806

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE SD  Delete  
 NAME WORSHAM, MARY  
 STREET ADDRESS 266 MILEHAM DR  
 CITY-ST-ZIP ORLANDO FL 32835

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE TD  Delete  
 NAME FOREST, JAMES  
 STREET ADDRESS 5240 BARNEGAT PT RD  
 CITY-ST-ZIP ORLANDO FL 32808

TITLE TREASURE  Change  Addition  
 NAME DAVID TACEY  
 STREET ADDRESS 606 APRICOT DR.  
 CITY-ST-ZIP OLOEE, FL 34761

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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: DAVID TACEY  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-21-00 407-299-1592

CR2E037 (10/00)