2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2007
Secretary of State

DOCUMENT# 700982

Entity Name: THE REFORMED PRESBYTERIAN CHURCH OF ORLANDO, FLORIDA, INC.

Current Principal Place of Business:

324 E LIVINGSTON
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

324 E LIVINGSTON
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 59-1112503 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FOREST, THOMAS H MR.
716 GOLFVIEW ST.
ORLANDO, FL 32804 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: VD ( ) Delete
Name: FOREST, THOMAS H
Address: 716 GOLFVIEW ST.
City-St-Zip: ORLANDO, FL 32804

Title: PD ( ) Delete
Name: BAILEY, SCOTT
Address: 3824 ALVERADO ST
City-St-Zip: ORLANDO, FL 32812

Title: SD ( ) Delete
Name: SMITH, JOANN
Address: 3524 SHAMROCK COURT
City-St-Zip: ORLANDO, FL 32806

Title: T ( ) Delete
Name: TACEY, DAVID
Address: 3156 TOURAINE AVE
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: THOMAS H FOREST VD 08/02/2007

Electronic Signature of Signing Officer or Director Date