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FILED

Feb 05 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701546 (4)

1. Corporation Name

ORMOND BEACH UNION CHURCH, INC.

Principal Place of Business

Mailing Address

56 N BEACH ST
ORMOND BEACH FL 32174-563856 N BEACH ST
ORMOND BEACH FL 32174-56383. Date Incorporated or Qualified
10/17/19603a. Date of Last Report
02/08/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

4. FEI Number

59-0915171

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOWENHAUPT, SAM B
49 CAPRI DR N
ORMOND BEACH FL 32174

81 Name

Beach, Rose

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

183 S. Ridgewood Ave

83

84 City

Ormond Beach

FL

85 Zip Code

32174

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Rose Beach Secretary

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-30-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETENAME
CRISS, HARRY
STREET ADDRESS
713 LUCERNE CR
CITY-ST-ZIP
ORMOND BEACH FL1.1 TITLE PD ☒ Change ☐ Addition1.2 NAME
LOWENHAUPT, MARGIE
1.3 STREET ADDRESS
49 CAPRI DR N.
1.4 CITY-ST-ZIP
ORMOND BEACH FLTITLE TD ☒ DELETENAME
LILLY, WLENA
STREET ADDRESS
204 N RIDGEWOOD AVE
CITY-ST-ZIP
ORMOND BEACH FL2.1 TITLE TD ☒ Change ☐ Addition2.2 NAME
LILLY, ELENA
2.3 STREET ADDRESS
204 N. RIDGEWOOD AVE
2.4 CITY-ST-ZIP
ORMOND BEACH FLTITLE D ☐ DELETENAME
BROWDER, RAYMOND F
STREET ADDRESS
593 N. RIDGEWOOD AVE
CITY-ST-ZIP
ORMOND BEACH FL 321743.1 TITLE ☐ Change ☐ Addition3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE S ☒ DELETENAME
LOWENHAUPT, SAM B
STREET ADDRESS
49 CAPRI DR N
CITY-ST-ZIP
ORMOND BEACH FL 321744.1 TITLE S ☒ Change ☐ Addition4.2 NAME
BEACH, ROSE
4.3 STREET ADDRESS
183 S. RIDGEWOOD AVE
4.4 CITY-ST-ZIP
ORMOND BEACH FLTITLE D ☐ DELETENAME
ANDERSON, HENRIETTA
STREET ADDRESS
94 OXBOW TR
CITY-ST-ZIP
ORMOND BCH FL5.1 TITLE ☐ Change ☐ Addition5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☐ DELETENAME
THIELEN, CLYDE
STREET ADDRESS
842 LUCERNE CR
CITY-ST-ZIP
ORMOND BEACH FL 321746.1 TITLE ☐ Change ☐ Addition6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Raymond F. Browder RAYMOND F. Browder 1-30-97 677-3363

CR2E037 (9/96)