NONPROFIT CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 715176 1. Corporation Name

CHRIST CHURCH, UNITY, OF ORLANDO, FLORIDA

Principal Place of Business 503 SOUTH ORANGE AVENUE

ORLANDO FL 32801

Mailing Address

503 SOUTH ORANGE AVENUE ORLANDO FL 32801

## **FILED** Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90063 050 \*\*\*\*61.25

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						,	
2 5 1 5	and of Business	2a. Mailing Address		<del></del>	3. Date Incorporated or Qualifed	<del></del>	<del></del> -
2. Principal Place of Business		<b>⊢</b> • •		08/28/1968			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			4. FEI Number	A	oplied For .
	HOLDEN AVENUE	27					ot Applicable -
22 77) City & State	City & State	y & State		5. Certificate of Status Desired		\$8.75 Additional	
23 ORLANDO, FL 28					3. Certificate of Status Desired	Fee R	equired
23 0 C L A NOO F- L 28 Zip Zip Zip			Country		6. Election Campaign Financing		May Be
24 32839 25 OKANG = 29 3			0		Trust Fund Contribution	Added to Fees	
	9. Name and Address of Current	Registered Agent		- <del></del> -	10. Name and Address of New Registers	d Agent	
			81	Name	_		
SCHLAEFER, PHILIP				Street A	ddress (P.O. Box Number is Not Acceptable)		,
503 S ORANGE AVE			-	<u> </u>			
ORLANDO FL 32801			83	83			
			84	City	. 6	85 Zip	Code
				L	The state was for the surross	of changing its	haratainas
11. Pursuant t	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes Felorida, Such change was aut	s, the abov horized by	e-named c the corpor	corporation submits this statement for the purpose ration's board of directors. I hereby accept the app	oi changing it	egistered
oπice or re agent, I ar	egistered agent, or both, in the state of m familiar with, and accept the obligation	ons of, Section 617.0503, Florid	da Statutes	i.		•	
SIGNATURE	·				pured when reinstating) DATE		
	Signature, typed or printed name of registered agent		13,	nt signature rec	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
12.	OFFICERS AND	DELETE	1.1 TITLE	<del></del>		☐ Change	Addition
TITLE	OUCH HAMMED IECE	(7) 00000	1.2 NAME	}			
NAME	SHELLHAMMER, JEFF 1770 NORDIC COURT		1.3 STREET ADDRESS		1	,	
0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• • • • • • • • • • • • • • • • • • • •			ĺ	v	,	
CITY-ST-ZIP	APOPKA FL DELETE		1.4 CITY-ST-ZIP 2.1 TITLE			Change	☐ Addition
TITLE	·		2.2 NAME	Ì	•		
NAME	Teer, ellis 1247 Henry Beach Drive		1	T ADDRESS			
STREET ADDRESS	ORLANDO FL		2.4 CITY-				
CITY+ST-ZIP	T DELETE		31 TITLE			Change	Addition
NAME	ORLANDO, RIVERA		3.2 NAME				
STREET ADDRESS	1413 KURUME ST		•	T ADDRESS		*	
	ORLANDO FL		3.4. CITY-				<u> </u>
CITY-ST-ZIP	D	☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME	WRIGHT, PATRICIA		4. 2 NAME	1			
STREET ADDRESS	977 EAGLE FOREST DRIVE		4.3 STREE	TADORESS			
CITY-ST-ZIP	APOPKA FL		4.4 CITY-5	ST-ZIP			
TITLE	D	☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME	AMARAL, MONA		5.2 NAME				,
STREET ADDRESS	3104 HARRISON AVE.		5.3 STREE	T ADDRESS			
CITY-ST-ZIP	ORLANDO FL		5.4 CITY-5	ST-ZIP			<u> </u>
TITLE	D	DELETE	6.1 TITLE		RICK VICHERS - DIRECT	Change	☐ Addition
NAME	BERGER, JULIE		6.2 NAME	ſ	RICK VICHERS - DIRECT 1710 ANTIGUA DRIVE ORLANDO, FL 32800		
STREET ADDRESS	2209 DOULTON DR		6.3 STREE	TADORESS	ORLANDO, FL 32800	•	
CITY-ST-ZIP	APOPKA FL		6.4 CITY-5	ST-ZIP			<u> </u>

14. 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 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, with all other like empowered.

SIGNATURE: