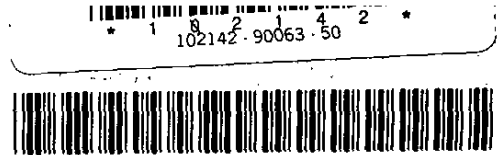


FILE NOW: FILING FEE IS \$61.25

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

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

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		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		08/28/1968	
22 771 HOLDEN AVENUE		27 City & State		4. FEI Number NOT APPLICABLE	
23 ORLANDO, FL		28 City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 32839		29 ORANGE		6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
SCHLAEFER, PHILIP 503 S ORANGE AVE ORLANDO FL 32801			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City FL 85 Zip Code		
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS					
TITLE	D ☐ DELETE				
NAME	SHELLHAMMER, JEFF				
STREET ADDRESS	1770 NORDIC COURT				
CITY-ST-ZIP	APOPKA FL				
TITLE	P ☐ DELETE				
NAME	TEER, ELLIS				
STREET ADDRESS	1247 HENRY BEACH DRIVE				
CITY-ST-ZIP	ORLANDO FL				
TITLE	T ☐ DELETE				
NAME	ORLANDO, RIVERA				
STREET ADDRESS	1413 KURUME ST				
CITY-ST-ZIP	ORLANDO FL				
TITLE	D ☐ DELETE				
NAME	WRIGHT, PATRICIA				
STREET ADDRESS	977 EAGLE FOREST DRIVE				
CITY-ST-ZIP	APOPKA FL				
TITLE	D ☐ DELETE				
NAME	AMARAL, MONA				
STREET ADDRESS	3104 HARRISON AVE.				
CITY-ST-ZIP	ORLANDO FL				
TITLE	D ☒ DELETE				
NAME	BERGER, JULIE				
STREET ADDRESS	2209 DOULTON DR				
CITY-ST-ZIP	APOPKA FL				
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE ☐ Change ☐ Addition					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE ☐ Change ☐ Addition					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE ☐ Change ☐ Addition					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE ☐ Change ☐ Addition					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE ☐ Change ☐ Addition					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE ☐ Change ☐ Addition					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					



SIGNATURE:

PHILIP SCHLAEFER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/99
Date

Daytime Phone #

CR2E037 (11/98)