

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**

95 APR 10 PM 12:27

DOCUMENT # 730557 (6)

1. Corporation Name  
**GRACE BRETHREN CHURCH OF ORLANDO, FLORIDA, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
5425 APOPKA-VINELAND RD ORLANDO FL 32819

3. Date Incorporated or Qualified **08/29/1974** 3a. Date of Last Report **05/01/1994**  
4. FEI Number **59-1575344** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**LEWIS, ALBERT L.  
201 E. PINE ST.  
ORLANDO FL 32801**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
PD DIAZ, JOHN SR. 12218 MEDAN STREET ORLANDO FL  
SD HAGANS, BONNIE 537 HORIZON DR. KENANSVILLE FL  
TD CHAMPION, JOHN 7218 PRATO AVENUE ORLANDO FL  
D DIAZ, JOHN L. JR. 12112 CUBEB CT. ORLANDO 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 **MANSETT, VERONICA**  
2.3 STREET ADDRESS **4816 SHOSHONE ORLANDO, FLORIDA 32819**  
2.4 CITY-ST-ZIP  
3.1 TITLE  Change  Addition  
3.2 NAME **TD ROBINS, SUSAN**  
3.3 STREET ADDRESS **12112 CUBEB COURT ORLANDO, FLORIDA 32837**  
3.4 CITY-ST-ZIP  
4.1 TITLE  Change  Addition  
4.2 NAME **D ROBINS, JOHN L.**  
4.3 STREET ADDRESS **12112 CUBEB CT. ORLANDO, FLORIDA**  
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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), 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 this filing.

SIGNATURE: *[Handwritten Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR