FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

K87296

Secretary of State 06-23-1999 90006 026 ***150.00

FILED

Jun 23, 1999 8:00 am

1. Corporation Name Church Street, Inc.

Principal Place of Business

000

Mailing Address

DA B. 1212

1.0. 100x 1353	1.0.100x 100 .	<i>)</i>		
			DO NOT WRITE IN THIS	S SPACE
Orlando, h 32802	Orlando, Fi	2000	3. Date Incorporated or Qualifed	
5. M. M. J.	•	32802	5-11-89	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 27 W. Church St	26 300 W. Ume	nica St.	59-2960109	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State Or Undo Fi	City & State		_6. Election Campaign Financing Trust Fund Contribution	-\$5:00 May Be Added to Fees
24 32801 25 Country USA	Zip Cou 29 30	intry	This corporation owes the current year In Personal Property Tax.	itangible
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent	
Mulvaney, Kenne	th A.	81 Name		
Mulvaney, Kenneth A. 300 W. america St		82 Street Addres	ss (P.O. Box Number is Not Acceptable)	
		83		
Adapte F.	32801	84 City		85 Zip Code

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	SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE							
12.	12. OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	PSTD DELETE	1,1 TITLE	☐ Change ☐ Addition					
NAME	Mulvaner, Kenneth A.	1.2 NAME						
STREET ADDRESS	Mulvaney, Kenneth A. 300 W. america St Orlando Fi 32801	1.3 STREET ADDRESS						
CITY-ST-ZIP	Orlando Fi 32801	1.4 CITY-ST-ZIP						
TITLE	V □ DETEIE	2.1 TITLE	☐ Change ☐ Addition					
NAME	Mulvancy, Brian M. 300 W. America St.	2.2 NAME						
STREET ADDRESS	300 W. america St.	2.3 STREET ADDRESS						
CITY-ST-ZIP	orlando fi 32801	2. 4 CITY-ST-ZIP						
TITLE	DELETE	.3,1.TTLE	☐ Change ☐ Addition					
NAME		3.2 NAME						
STREET ADDRESS	•	3.3 STREET ADDRESS						
CITY-ST-ZIP		3,4, CITY-ST-ZIP						
TITLE	DELETE	4.1 TITLE	☐ Change ☐ Addition					
NAME	*	4, 2 NAME						
STREET ADDRESS		4.3 STREET ADDRESS						
CITY-ST-ZIP		4,4 CITY-ST-ZIP						
TITLE	☐ DELETE	5.1 TITLE	Change Addition					
NAME		5.2 NAME						
STREET ADDRESS		5.3 STREET ADDRESS						
CITY-ST-ZIP		5.4 CITY-ST-ZIP						
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition					
NAME		6.2 NAME						
STREET ADDRESS		6.3 STREET ADDRESS						
CITY-ST-ZIP		6.4 CITY-ST-ZIP						
14. Legeby certify that the information empolied with this filing does got qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information								

and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with all other like empowered. indicated on this annual report or s officer or director of the Block 12 or Block 13 of