

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90220 045 ****70.00

DOCUMENT # N00000005943

1. Entity Name

CANDLELIGHTERS OF GREATER ORLANDO, INC.

Principal Place of Business

Mailing Address

**354 BRAVADA STREET
 OCOEE FL 34761**

**354 BRAVADA STREET
 OCOEE FL 34761**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3679403**

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GIALLELLA, MINDY
 354 BRAVADA STREET
 OCOEE FL 34761**

Name

Street Address (P.O. Box Numbers Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

M. Giallella

4/17/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	JONES, JOEL D	4051 GOLFSIDE DR	ORLANDO FL 32808	<input type="checkbox"/>
DT	WALKER, JERRI	518 GORE	ORLANDO FL 32801	<input type="checkbox"/>
SD	SELLERS, JUDY	1070 SADDLEBACK RD	APOPKA FL 32703	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	JEFFERY BORNSTEIN	436 BRIGHTWATER CIR	MAITLAND, FL 32751	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SD	MISSY TOUCHET	1487 COUNTRY VILLAG CRT	APOPKA, FL 32703	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D	JESSICA JONES	2880 DONALDSON DR	ORLANDO, FL 32812	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	ULTIMA MORGAN	1520 WHITSTABLE CT	LAKE MARY FL 32701	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	TAMARA TATUM	4201 PLAYA CRT	ORLANDO FL 32812	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeffery A. Bornstein
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEFFERY A. BORNSTEIN

4-22-02
 Date

407-650-7270
 Daytime Phone #

CR2E037 (9/01)