


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # N49842 1. Entity Name THE ORLANDO CHAPTER OF THE GOSPEL MUSIC WORKSHOP OF AMERICA, INC.	
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Principal Place of Business 3242 W. CHURCH ST. ORLANDO, FL 32805 US	Mailing Address 3242 W. CHURCH ST. ORLANDO, FL 32805 US
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DO NOT WRITE IN THIS SPACE



03092008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3127180	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WHITE, RUTHA B.
3242 W CHURCH ST
ORLANDO, FL 32805

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KEMP, LINDA P.O. BOX 53 N/A OAKLAND, FL 34760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SIMS, TAMBRA R 6707 MERITMOOR CIR ORLANDO, FL 32818
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AAD CANTINE, ADRIENNE 112 ESSEX AVENUE #35A ALTAMONTE SPRINGS, FL 32701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BMGR WHITE, III, ERNEST 1844 DOC LK CIR. APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/02/08-80090-022 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Rutha B. White 3/12/08 (321)746-1966
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #