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MAY -1 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **N49842** (0)

1. Corporation Name

**THE ORLANDO CHAPTER OF THE GOSPEL MUSIC WORKSHOP
OF AMERICA, INC.**

Principal Place of Business

Mailing Address

3242 W. CHURCH ST.
ORLANDO FL 32805
US

P.O. BOX 555976, N/A
ORLANDO FL 32805
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/10/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3127180

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

Trust Fund Contribution

☐

7. Nonprofit with IRS 501(c)(3)

\$68.75 Supplemental
Fee Not Required

Tax Exempt Status

☒

8. This corporation has liability for intangible tax under S. 199.032.

Florida Statutes

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05 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 (Typed or printed name of registered agent and the filer) (Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	WHITE, RUTHA B.
STREET ADDRESS	3242 W CHURCH ST
CITY, ST, ZIP	ORLANDO FL
TITLE	D
NAME	WESLEY, DEBBYE
STREET ADDRESS	605 N LAKE BLVD #69
CITY, ST, ZIP	ALTAMONTE SPRINGS FL
TITLE	D
NAME	DAVIS, R.T.
STREET ADDRESS	1953 W ACADIN DR
CITY, ST, ZIP	DELTONA FL
TITLE	D
NAME	NEWTON, CLARA
STREET ADDRESS	4534 KIRKLAND BLVD
CITY, ST, ZIP	ORLANDO FL
TITLE	D
NAME	DORSEY, BEULAH
STREET ADDRESS	3428 PIPES O THE GLEN WY
CITY, ST, ZIP	ORLANDO FL
TITLE	D
NAME	NEWTON, ANNIE
STREET ADDRESS	1900 ATTUCKS AVE
CITY, ST, ZIP	ORLANDO FL

14 TITLE	☐ Change ☐ Addition
15 NAME	
16 STREET ADDRESS	
17 CITY, ST, ZIP	
18 TITLE	☐ Change ☐ Addition
19 NAME	
20 STREET ADDRESS	
21 CITY, ST, ZIP	
22 TITLE	☐ Change ☐ Addition
23 NAME	
24 STREET ADDRESS	
25 CITY, ST, ZIP	
26 TITLE	☐ Change ☐ Addition
27 NAME	
28 STREET ADDRESS	
29 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 190.07(2)(b), 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 an address.

SIGNATURE:

Rutha B. White - Rutha B. White (President) 4/26/95 - (407) 293-4648

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature (Typed or printed name of filer)