

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 26, 2007 8:00 am**  
**Secretary of State**

01-26-2007 90032 010 \*\*\*\*61.25

<b>DOCUMENT # 701552</b> 1. Entity Name <b>FIRST UNITED CHURCH OF CHRIST OF ORLANDO, INC.</b>					
Principal Place of Business <b>4605 CURRY FORD ROAD ORLANDO, FL 32812</b>			Mailing Address <b>4605 CURRY FORD ROAD ORLANDO, FL 32812</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				4. FEI Number <b>23-7450935</b>	
6. Name and Address of Current Registered Agent  <b>MCCLURE, RODERIC J 5325 CHATSWORTH CT ORLANDO, FL 32812</b>				7. Name and Address of New Registered Agent Name <b>David Wells</b> Street Address (P.O. Box Number is Not Acceptable) <b>525 South Conway Road #202</b> City <b>Orlando</b> <b>FL</b> Zip Code <b>32807</b>	
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 <i>David H Wells</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<b>David Wells</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>		<b>1-21-07</b> <small>DATE</small>	
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCCLURE, RODERIC 5325 CHATSWORTH CT ORLANDO, FL 32812 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>WELLS, DAVID</del> WELLS, DAVID 525 SOUTH CONWAY # 202 ORLANDO, FL 32807 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Wells, David 525 South Conway #202 Orlando FL 32807 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COLES, L. PAT 1734 ROSE GARDEN LANE ORLANDO, FL 32825 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President August Calabrese August 3040 Barnstable Place Orlando FL 32827 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCHRADER, JOYCE 2805 SUGARHILL COURT ORLANDO, FL 32822 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: <i>David H Wells</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>David Wells</b>		<b>1-21-07</b> <small>Date</small>	
				<b>407-277-4945</b> <small>Daytime Phone #</small>	