2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2000 8:00 am
Secretary of State
01-31-2000 90099 034 ****61.25

DOCUMENT # 703519

1. Entity Name

PRINCE OF PEACE LUTHERAN CHURCH, ORANGE COUNTY,

Principal Place of Business	Mailing Address
~~COUNTY~~ ORLANDO FLORIDA INC 1515 SOUTH SEMORAN BLVD. ORLANDO FL 32807	~~COUNTY~~ ORLANDO FLORIDA INC 1515 SOUTH SEMORAN BLVD. ORLANDO FL 32807-2919

DO NOT WRITE IN THIS SPACE

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 59-6032797 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

~~6. Name and Address of Current Registered Agent~~	7. Name and Address of New Registered Agent
WIEBEL, JAMES R REV 1515 S SEMORAN BLVD ORLANDO FL 32807	Name Street Address (P.O. Box Number is 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 _____
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	PD LAUHER, DON 368 SYLVAN DR WINTER PARK FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Hans Tews 1508 Spring Lake Dr Orlando, FL 32804	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LIESKE, ANN 1826 SENECA BLVD WINTER SPRINGS FL 32708	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CUILLA, BOB 2415 BRIXHAM AVE ORLANDO FL 32828	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP, S, D Scott Williams 2709 Kingfisher Dr Orlando FL 32806	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV BROOKS, JOHN 9345 BUTTONWOOD ST ORLANDO FL 32825	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP, D Jacinto Araya 3208 Red W. Boat Orlando, FL 32829	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OWENS, LINDEE 4625 GATLIN OAKS LN ORLANDO FL 32806	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FUSSELL, LOUANN 2313 SUMMERLIN AVE ORLANDO FL 32806	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: SIGNATURE REQUIRED 1/12/2000 407-843-0210
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #