## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 703519** 

FILED Jan 15, 2004 Secretary of State

Entity Name: PRINCE OF PEACE LUTHERAN CHURCH, ORANGE COUNTY, ORLANDO, FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** COUNTY ORLANDO FLORIDA INC 1515 SOUTH SEMORAN BLVD. ORLANDO, FL 32807 **New Mailing Address: Current Mailing Address:** COUNTY ORLANDO FLORIDA INC 1515 SOUTH SEMORAN BLVD. ORLANDO, FL 32807 FEI Number: 59-6032797 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WIEBEL, JAMES R REV 1515 S SEMORAN BLVD ORLANDO, FL 32807 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HOUSE, DAVID Name: Name: 13305 LAKE TURN Address: Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition Name: LOVELACE, TINA Name: Address: 3877 SUN DEW DR Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip: Title: **VPS** () Delete Title: () Change () Addition GREENFIELD, PETE Name: Name: Address: 5014 SHELLEY CT Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: BROOKS, JOHN JR Name: 9345 BUTTONWOOD ST Address: Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID HOUSE PD 01/15/2004