

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90276 046 ****61.25

DOCUMENT # 703519

1. Entity Name

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



Principal Place of Business

COUNTY ORLANDO FLORIDA INC
1515 SOUTH SEMORAN BLVD.
ORLANDO, FL 32807

Mailing Address

COUNTY ORLANDO FLORIDA INC
1515 SOUTH SEMORAN BLVD.
ORLANDO, FL 32807

50006005



03082006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

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

WIEBEL, JAMES R REV
1515 S SEMORAN BLVD
ORLANDO, FL 32807

**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 REV JAMES R WIEBEL

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-stating)

DATE

3-15-06

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HOUSE, DAVID W MR.
STREET ADDRESS 13305 LAKE TURN
CITY-ST-ZIP ORLANDO, FL 32804

TITLE TD
NAME DEVRIES, D. CHARLES MR.
STREET ADDRESS 9645 OLD MARSCH COURT
CITY-ST-ZIP ORLANDO, FL 32832

TITLE VPS
NAME ~~GREENFIELD, PETE MR.~~
STREET ADDRESS ~~5014 SHELLEY ST~~
CITY-ST-ZIP ~~ORLANDO, FL 32807~~

TITLE D
NAME LUCYSHYN, JESSICA MRS.
STREET ADDRESS 1912 HAMPTON CIRCLE EAST
CITY-ST-ZIP WINTER PARK, FL 32792

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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: David W House, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-14-06

407-207-6831