

703808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

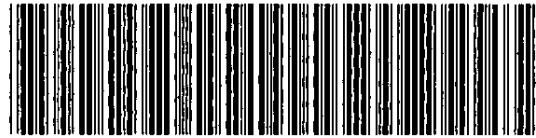
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100134068471

08/08/08--01007--018 **35.00

08 AUG 21 PM 12:29

SECRETARY OF STATE
DIVISION OF CORPORATIONS

Rn/chg
@ 8/21/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: First United Methodist Church of Orlando, Inc
(Name of Corporation)

DOCUMENT NUMBER: 703808

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

 LISA Lietz
(Name of Contact Person)

1st United Methodist Church
(Firm/Company)

142 E. Jackson St.
(Address)

Orlando FL 32801
(City/State and Zip Code)

For further information concerning this matter, please call:

Same at (407) 849 6080
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 13, 2008

LISA LIETZ
FIRST UNITED METHODIST CHURCH
142 E. JACKSON ST.
ORLANDO, FL 32801

SUBJECT: FIRST UNITED METHODIST CHURCH OF ORLANDO, INC.
Ref. Number: 703808

We have received your document for FIRST UNITED METHODIST CHURCH OF ORLANDO, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

You failed to list the new registered agent on the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 108A00045868

RECEIVED
2008 AUG 21 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: First United Methodist Church of Orlando, Inc.
2. The principal office address: 142 E. Jackson St. Orlando, FL 32801
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/29/1962 Document number: 703808
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Janice A. Henderson
142 E. Jackson St.
Orlando FL 32801

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 AUG 21 PM 12:29

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Lisa Lietz
142 E. Jackson St.
(P.O. Box NOT acceptable)
Orlando, FL 32801

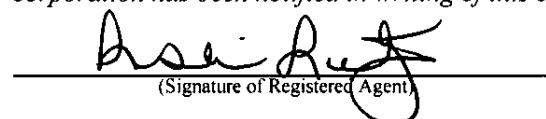
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

EDWARD LOBNITZ - PRESIDENT FUMCO
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

7/28/08
(Date)

If signing on behalf of an entity:

Lisa Lietz
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)