NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 704877

1. Corporation Name

GREATER ORLANDO BAPTIST ASSOCIATION, INC.

FILED Apr 27, 1999 8:00 am § Secretary of State

04-27-1999 90212 023 ***122.50

Principal Place of Business Mailing Address							
1906 WEST LEE ROAD 1906 WEST LI)	
ORLANDO FL 32810 ORLANDO FL 32810							
•) (BBIII (BB)) dalij alam jojii (BBI) idai Bibi) alam alam diam alam sam sam	
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2. Principal Pl	2a. Mailing Address	ailing Address			3. Date Incorporated or Qualifed		
21		26				12/05/1962	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				4. FEI Number Applied For	
22	Language States	27				59-6033984 Not Applicable	
City & State		City & State	City & State			5. Certificate of Status Desired \$8.75 Additional	
23	•	28	28			5. Certifcate of Status Desired	
Zip	Country Zip		Cou	Country		6. Election Campaign Financing S5.00 May Be	
24	25	<u>⊢</u> ',	30			Trust Fund Contribution Added to Fees	
24		and Address of Current Registered Agent		T		10. Name and Address of New Registered Agent	
				81	Name		
Wagner, Richard A.				82	Street A	ddress (P.O. Box Number is Not Acceptable)	
	ILONIAL AVENUE			03			
ORLANDO	FL 32801			83		٠.	
	March 18 March			84	City	85 Zip Code	
					•	F <u>L </u>	
11. Pursuant	to the provisions of Sections 617,0502	and 617.1508, Florida Statute	es, the a	bove	-named c	corporation submits this statement for the purpose of changing its registered	
office or r	egistered agent or both in the State 0	it Florida. Such change was at	utnonzed	I DV L	he corpor	ration's board of directors. I hereby accept the appointment as registered	
agent. i ai	m familiar with, and accept the obligati	ons of, Section 617.0303, Fio	ilua Stat	uies.			
SIGNATURE Slovesture, Noed or grinted pame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
Signature, typed or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstatung) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR							
		DELETE	1.1 TI	ΠĒ.	<u></u> T	D ☐ Change ☑ Addition	
TITLE	D -	A DELETE			-	James Fortingerry	
NAME	DOCAMPO, EDUARDO		1.2 NAME			6548 Dover Cove Drive	
STREET ADDRESS	1012 QUAKER RIDGE CT		1.3 5	TREET.	ADDRESS	45 10 4010 0000	
CITY-ST-ZIP	OVIEDO FL 32765	<u></u>		TY-ST	-ZIP \	OFIGNAD PL 3000	
TITLE	S	DELETE	2.1 TI	īΕ	- -	Change (A) Addition	
NAME	MCALLISTER, BOB	,	2.2 N	AME	Ì	Andre Coulter a pu	
STREET ADDRESS	5141 LAZY OAKS DRIVE			2.3 STREET ADDRESS 3 \		318) Wholping Crane Bun	
CITY-ST-ZIP _	WINTER PARK FL		2:40	:ITY-ST	r-ZIP	Kicsimmer FL 34741	
TITLE			3.1 Ti			P	
	D Haynes, Bill		3.2 N			0:11 Houses	
NAME	3800 WEKIVA SPRINGS RD					3800 Wilkiua Springs Road	
STREET ADDRESS				Ι .			
CITY-ST-ZIP	LONGWOOD FL 32779			4.1 TITLE		D Change Addition	
TITLE	P	TANDETELE			1	D C Controlled Appropriate	
NAME	COLLINS, MARSHALL		4.21	ME	1	Tim Wilder	
STREET ADDRESS	1950 HOHICAN TR		4.3 S	TREET	ADDRESS	3267 Buffalott	
CITY-ST-ZIP	MAITLAND FL	·	4.4 C	ITY-ST	-ZIP	KISSI ~ mee H 34146	
TITLE	T	☐ DELETE	5.1 TI	TLE		☐ Change ☐ Addition	
NAME	COPELAND, ED		5.2 N	AME			
STREET ADDRESS	1500 CAVENDISH RD.		5.3 S	TREET	ADDRESS		
	WINTER PARK FL 32789		5.4 C	ITY-ST	-ZIP		
CITY-ST-ZIP		☐ DELETE	6.1 T			☐ Change ☐ Addition	
TITLE	D MARCHEN MARCHE	الما المالية	6.2 N				
NAME	MITCHELL, HAROLD				4000000		
STREET ADDRESS			- 1		ADDRESS		
CITY-ST-ZIP	MAITLAND FL		6.4 C	ITY-ST	-ZIP	' · · · · · · · · · · · · · · · · · · ·	

MAITLAND FL 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: