2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: Marie Joy Marie of SIGNATURE OF SIGNATURE OF SIGNANG OFFICER OR DIRECTOR

Feb 07, 2005 8:00 am **DOCUMENT # 708149 Secretary of State** 1. Entity Name 02-07-2005 90073 009 ****70.00 ORLANDO DRIVE-IN CHURCH, INC. Principal Place of Business Mailing Address 3100 S GOLDENROD RD ORLANDO FL 32812 516 MORROCO AVETORILANDO FL 32822 40014442 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 59-2384965 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Ø Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LEDGETT, MARIE 516 MOROCCO AVE Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32807 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By May 1; 2005 Added to Fees Florida Department of State 10 OFFICERS AND DIRECTORS 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change Change MCDANIELS, M. A. ms Daniels, mA NAME NAME 3610 JAMAICA LN P.O. Box 338 STREET ADDRESS STREET ADDRESS OVIEDO FL 32765 CITY-ST-ZIP CITY-ST-ZIP Rossman NC 28772 TITLE ☐ Delete TITLE ☐ Change ☐ Addition BROWN, TOM 4528 MARTY RD STREET ADDRESS STREET ADDRESS ORLANDO FL 32822 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete ☐ Change ☐ Addition BARNETT, WAYNE NAME NAME 2805 GULFSTREAM RD. STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP CITY-S1-ZIP TITLE Delete ☐ Change ☐ Addition RIZER, LLOYD 5910 LYLE STREET STREET ADDRESS STREET ADDRESS ORLANDO FL 32807 CITY-ST-ZIP CITY-ST-ZIP HD F ☐ Delete TITLE Change ☐ Addition LEGGEH, MARIE NAME NAME Leggett, marie 516 MOROCCO AVE STREET ADDRESS STREET ADDRESS ORLANDO FL 32807 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition PRESCOTT, MARTHA NAME NAME 7422 MOLOAKI STREET STREET ADDRESS STREET ADDRESS ORLANDO FL 32822 CITY-ST-7IP CITY-ST-7IP 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.

FILED