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Mar 31 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710488 (8)

1. Corporation Name

FORT GATLIN ALLIANCE CHURCH OF THE CHRISTIAN AND
MISSIONARY ALLIANCE, INC.

Principal Place of Business

Mailing Address

3300 S BUMBY AVENUE
ORLANDO FL 32806

3300 S BUMBY AVENUE
ORLANDO FL 32806



3. Date Incorporated or Qualified

03/08/1966

4. FEI Number

59-6211831

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐

Yes

☒

No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐

Yes

☒

No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SWANN, RICHARD R
17 S MAGNOLIA AVE
ORLANDO FL 32801

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1031 W. Morse Blvd., Suite 270

83

84 City

Winter Park

FL

85 Zip Code

32789

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

3/23/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD ☒ DELETE

NAME WONDERLY, SCOTT A.
STREET ADDRESS 4712 JAMERSON PLACE
CITY-ST-ZIP ORLANDO FL

TITLE TD ☐ DELETE

NAME MCCARTY, JAMES C
STREET ADDRESS 3004 CHELSA STREET
CITY-ST-ZIP ORLANDO FL 32803

TITLE PD ☐ DELETE

NAME HOFER, CRAIG A.
STREET ADDRESS 5227 FORMBY DR
CITY-ST-ZIP ORLANDO, FL 00000

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE SD ☒ Change ☐ Addition

1.2 NAME HENRICKSEN, RICHARD C.
1.3 STREET ADDRESS 2956 COTTAGE GROVE COURT
1.4 CITY-ST-ZIP ORLANDO, FL 32822

2.1 TITLE TD ☒ Change ☐ Addition

2.2 NAME WIDICK, GLENN D.
2.3 STREET ADDRESS 3044 BAY TREE DRIVE
2.4 CITY-ST-ZIP ORLANDO, FL 32806

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP 32812

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

Craig A. Hofer

Craig A. Hofer

2/27/98

(407)859-2140

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

CP2E037 (1097)