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Apr 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **711625** (4)

1. Corporation Name

UNIVERSITY BAPTIST CHURCH, INC. OF ORLANDO



Principal Place of Business 14707 SUSSEX DR ORLANDO FL 32826	Mailing Address 14707 SUSSEX DR ORLANDO FL 32826-3821
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3. Date Incorporated or Qualified 10/13/1966	3a. Date of Last Report 03/11/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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4. FEI Number 59-8591258	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent OWENS, EARL 2706 HILDA CT ORLANDO FL 32826	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	METZGER, SHARON	1.2 NAME	
STREET ADDRESS	4012 KING EDWARD DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	OWNES, EARL	2.2 NAME	OWENS, EARL
STREET ADDRESS	2706 HILDA CT	2.3 STREET ADDRESS	2706 HILDA CT
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	ORLANDO FL
TITLE	S ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	KELLEY, DORIS	3.2 NAME	
STREET ADDRESS	3905 TANNER ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	
TITLE	D ☒ DELETE	4.1 TITLE	☐ Change ☒ Addition
NAME	MOORE, RUSSELL	4.2 NAME	FUSSELL, TURNER L
STREET ADDRESS	2109 PEBBLE BEACH BLVD	4.3 STREET ADDRESS	3510 CIRQUE CIRCLE
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	ORLANDO FL
TITLE	D ☐ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME	METZGER, RICHARD	5.2 NAME	METZGER, RICHARD
STREET ADDRESS	4012 KING EDWARD DRIVE	5.3 STREET ADDRESS	4012 KING EDWARD DRIVE
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	ORLANDO FL
TITLE	C ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	MITCHELL, GEORGE R.	6.2 NAME	
STREET ADDRESS	2908 RADNOR AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	6.4 CITY-ST-ZIP	

14. I do 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: **SHARON S. METZGER** *Sharon S. Metzger* 4/15/97 (407)281-1709

CR2E037 (9/96)