

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 31 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		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
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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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3. Date Incorporated or Qualified 10/13/1966
4. FEI Number 59-8591258
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
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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	
TITLE	T <input type="checkbox"/> DELETE
NAME	METZGER, SHARON
STREET ADDRESS	4012 KING EDWARD DRIVE
CITY-ST-ZIP	ORLANDO FL
TITLE	TR <input checked="" type="checkbox"/> DELETE
NAME	OWNES, EARL
STREET ADDRESS	2706 HILDA CT
CITY-ST-ZIP	ORLANDO FL
TITLE	S <input type="checkbox"/> DELETE
NAME	KELLEY, DORIS
STREET ADDRESS	3905 TANNER ROAD
CITY-ST-ZIP	ORLANDO FL
TITLE	D <input type="checkbox"/> DELETE
NAME	FUSSELL, TURNER L.
STREET ADDRESS	3510 CIRQUE CIRCLE
CITY-ST-ZIP	ORLANDO FL
TITLE	TR <input type="checkbox"/> DELETE
NAME	METZGER, RICHARD
STREET ADDRESS	4012 KING EDWARD DRIVE
CITY-ST-ZIP	ORLANDO FL
TITLE	C <input checked="" type="checkbox"/> DELETE
NAME	MITCHELL, GEORGE R.
STREET ADDRESS	2908 RADNOR AVE
CITY-ST-ZIP	ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Michael Fagone
2.3 STREET ADDRESS	1826 Rockhurst Ave.
2.4 CITY-ST-ZIP	Orlando FL 32826
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Sharon K. Metzger / Sharon K. Metzger* 3/18/98 407-281-1709

CR2E037 (10/97)