## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## Mar 07, 2003 8:00 am Secretary of State DOCUMENT # 712201 1. Entity Name 03-07-2003 90132 032 \*\*\*\*61.25 CHURCH OF CHRIST OF WEST ORANGE,: INC. Principal Place of Business Mailing Address 💠 1450 S. DANIELS ROAD 1450 S. DANIELS ROAD P.O. BOX 771012 WINTER GARDEN FL 34787 WINTER GARDEN FL 34787-4325 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1520329 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent <u> Thomas L. Munson</u> BOLLINGER, DONALD E Street Address (P.O. Box Number is Not Acceptable) 1318 WESTON WOODS BLVD 71 Millholland Way ORLANDO FL 32818 City Zip Code 0akland 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. **SIGNATURE** Thomas I Munson 3/2/2003 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change WHITE, DOYLE Addition NAME STREET ADDRESS 4808 ROCK SPRINGS RD STREET ADDRESS CITY-ST-ZIP APOPKA, FL 00000 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition DAY, ROBERT NAME NAME STREET ADDRESS 9277 WICKHAM WAY STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32836 CITY-ST-ZIP √ Delete TITLE ☐ Change Addition **BOLLINGER**, DONALD NAME Ken Wingate 1318 WESTON WOODS BLVD STREET ADDRESS STREET ADDRESS 11149 Robertson Road CITY-ST-ZIP ORLANDO FL 32818 CITY-ST-7IP Winter Garden FL ☐ Delete TITLE ☐ Change ☐ Addition BARTON, FOY NAME STREET ADDRESS 12508 SUMMERPORT BCH WAY STREET ADDRESS CITY-ST-ZIP Windermere Fl CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME PRUITT, HERB NAME STREET ADDRESS 282 MILEHAM DR. STREET ADDRESS CITY-ST-ZIP orlando fl CITY-ST-ZIP TITLE ☐ Delete TITLE Ρ Change ☐ Addition NAME MUNSON, TOM NAME STREET ADDRESS 71 MILLHOLLAND WAY STREET ADDRESS CITY-ST-7IP

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.

CITY-ST-ZIP

SIGNATURE:

OAKLAND FL 34760

QUIRED Herb Pruitt

3/2/2003

407-656-2770

**FILED**