

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714518

FILED
Feb 08, 2009
Secretary of State

Entity Name: FIRST UNITARIAN CHURCH OF ORLANDO ENDOWMENT FUND, INC.

Current Principal Place of Business:

1901 E. ROBINSON STREET
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

1901 E. ROBINSON STREET
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 59-6205653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDERS, JOHN A
111 NORTH ORANGE AVENUE SUITE 1800
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: POLLOCK, SANDRA
Address: 2021 OREGON STREET
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: GROSS, JANE
Address: 8716 FERNWICKE CT.
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: DUROCHER, JOSEPH W
Address: 3563 EMERYWOOD LANE
City-St-Zip: ORLANDO, FL 32812

Title: DT () Delete
Name: SANDERS, JOHN A
Address: 641 WILLIAMS DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: JACKSON, ELIZABETH
Address: 3101 FLORENE DRIVE
City-St-Zip: ORLANDO, FL 32806

Title: DP () Delete
Name: COHEN, MICHAEL
Address: 2505 DONALDSON DRIVE
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN A. SANDERS

DT

02/08/2009

Electronic Signature of Signing Officer or Director

Date