

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 714755

1. Entity Name

FAITH BAPTIST CHURCH, INC. OF ORLANDO, FLORIDA

Principal Place of Business

500 N BUMBY AVE  
ORLANDO FL 32803

Mailing Address

500 N BUMBY AVE  
ORLANDO FL 32803

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6176793

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

YARBOROUGH, CECIL  
500 N. BUMBY AVE  
ORLANDO FL 32803

7. Name and Address of New Registered Agent

Name

Chris Wallace

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

231 Tom Sawyer Ct.

City

Orlando

FL

Zip Code

32828

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.

SIGNATURE

*Chris Wallace*

Chris Wallace, Chm. of Deacons

March 22, 2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE ST  
NAME GARDENER, FRED ☐ Delete  
STREET ADDRESS 1907 E. JEFFERSON STREET  
CITY-ST-ZIP ORLANDO FL 32803

TITLE TR ☒ Delete  
NAME AYALA, JOSE  
STREET ADDRESS 14203 CASTLEROCK DRIVE  
CITY-ST-ZIP ORLANDO FL

TITLE T ☐ Delete  
NAME D'APRILE, II M  
STREET ADDRESS 10506 HUNTRIDGE ROAD  
CITY-ST-ZIP ORLANDO FL

TITLE D ☐ Delete  
NAME MCDANIEL, MARK  
STREET ADDRESS 1001 CALIFORNIA CREEK DR  
CITY-ST-ZIP OVIEDO FL

TITLE D ☐ Delete  
NAME GOODIN, JOHN  
STREET ADDRESS 3306 TOASY DRIVE  
CITY-ST-ZIP ORLANDO FL 32806

TITLE CT ☐ Delete  
NAME YARBOROUGH  
STREET ADDRESS 411 WESTCHESTER DR  
CITY-ST-ZIP ALTAMONTE SPRINGS FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE CD ☐ Change ☒ Addition  
NAME Chris Wallace  
STREET ADDRESS 231 Tom Sawyer Ct.  
CITY-ST-ZIP Orlando, FL 32828

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Change ☐ Addition  
NAME Yarborough, Cecil  
STREET ADDRESS 411 Westchester Dr.  
CITY-ST-ZIP Altamonte Springs, FL 32701

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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.

SIGNATURE: *Chris Wallace* SIGNATURE REQUIRED WALLACE

March 22, 2001 (407) 894-4031

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

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