2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2004 8:00 am Secretary of State

DOCUMENT # 715977 1. Entity Name THE METHODIST CHURCH DISTRICT BOARD OF MISSIONS AND CHURCH EXTENSION OF ORLANDO DISTRICT, INC.					04-12-2004 902	-		
Principal Place of Business 2125 E SOUTH ST. ORLANDO, FL 32803-3502 Mailing Address 2125 E SOUTH ST. ORLANDO, FL 32803-3502 ORLANDO, FL 32803-3502						eleli Bibli Bibli Bibli Bib	Oliki mi emma	
2. Principal P	Place of Business	3. Mailing Address						
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Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		hg-NP CR	R2E037 (10/03)		
City & State		City & State		4. FEI Number 59-11471	15	<u> </u>	oplied For ot Applicable	
Zìp	Country	Zip	Country	5. Certificate of S	tatus Desired	₽0.75 ⋅ ⋅	ditional	
·	6. Name and Address of Curre	nt Registered Agent		7. Name and Add	dress of New Regist	ered Agent =		
					ECKER JEFFREY P.			
2125 F SOUTH ST				Address (P.O. Box Number is Not Acceptable) RINGWAY DRIVE				
			City			7:-0-4		
			City D1	DELTONA FL 32725				
	e named entity submits this statement tions of registered agent.	for the purpose of changing its	registered office or	registered agent, or both, in	the State of Florida.	I am familiar with,	and accept	
	Ju Pth. 1	THEODEN 1	D CTOTA	VED COR	EA 031 11/-	1011		
, SIGNATURE .	Stanatury, speed or printed name of registered age	ant and title if applicable. (NOTE	: Registered Agent signatu	KER SECRE	17KY 4/7	107	i	
			. riegioto do rigorit digratio	re required when reinstating)		DATE]	
,	Filing Fee is \$61.25 Due by May 1, 2004		paign Financing	\$5.00 May Be Added to Fees	Make o	check payable to		
10.	Due by May 1, 2004 OFFICERS AND I	9. Election Cam Trust Fund C	npaign Financing ontribution.	\$5.00 May Be Added to Fees	Make o	check payable to Department of SI	late	
TITLE	OFFICERS AND I	9. Election Carr Trust Fund C	npaign Financing ontribution. 11. TITLE	\$5.00 May Be Added to Fees	Make o	check payable to Department of St	tate	
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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 origin, attachment with an address, with all other like empowered.

SIGNATURE: DAVID K: Elyea David K | Live | 4-7-200+ 407-230-0569

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Dave Daytime Phone #