

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

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90065 014 ****61.25

DOCUMENT # 715977

1. Entity Name

**THE METHODIST CHURCH DISTRICT BOARD OF MISSIONS
AND CHURCH EXTENSION OF ORLANDO DISTRICT, INC.**



Principal Place of Business

**2125 E SOUTH ST.
ORLANDO FL 32803-3502**

Mailing Address

**2125 E SOUTH ST.
ORLANDO FL 32803-3502**

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 **59-1147115**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MCDANIEL, DIANE M
2125 E SOUTH ST
ORLANDO FL 32803**

7. Name and Address of New Registered Agent

Name

Diane M Kepus

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

2125 E. South Street

Orlando

City

FL

Zip Code
32803

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 **Diane M. Kepus**

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	TD	<input type="checkbox"/> Delete
NAME	WALLACE, HUGH	
STREET ADDRESS	615 EXECUTIVE DRIVE	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MURRAH, KENNETH	
STREET ADDRESS	800 W MORSE BLVD	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	DP	<input type="checkbox"/> Delete
NAME	BLEDSE, TOM	
STREET ADDRESS	331 N. MAITLAND BLVD.	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	WITTEN, W. DEAN	
STREET ADDRESS	2125 E SOUTH ST	
CITY-ST-ZIP	ORLANDO FL 32803-3502	
TITLE	S	<input type="checkbox"/> Delete
NAME	MCDANIEL, DIANE	
STREET ADDRESS	8045 EXCALIBOR CT	
CITY-ST-ZIP	ORLANDO FL 32822	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Thomas Bledsoe	
STREET ADDRESS	331 N. Maitland Blvd.	
CITY-ST-ZIP	Winter Park, FL	
TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dave Elyea	
STREET ADDRESS	5668 Freeport Dr.	
CITY-ST-ZIP	Tavares, FL 32778	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jeffrey Stiggins	
STREET ADDRESS	2125 E. South St.	
CITY-ST-ZIP	Orlando, FL 32803	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Diane Kepus	
STREET ADDRESS	7817 Hatteras Rd	
CITY-ST-ZIP	Orlando, FL 32822	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

SIGNATURE *Diane M. Kepus*

407-896-2230

CR2E037 (10/02)