R)

DOCUMENT # 718397

1. Entity Name

FELLOWSHIP BAPTIST CHURCH OF ORLANDO, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 23 AM 10:49

Principal Place of Business	Mailing Address
103 HOLDEN AVE. ORLANDO FL 32839-2005	103 HOLDEN AVE. ORLANDO FLA 32839-2005

DO NOT WRITE IN THIS SPACE

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 59-2056965 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ORD, DOUG 103 HOLDEN AVENUE #3 ORLANDO FL 32839	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ORD, DOUG 103 HOLDEN AVE. ORLANDO FL	☐ Delete	D Paul Thompson 4839 Headlee Dr. Orl. Fla 32822	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WOMBLE, THOMAS J 606 CALIFORNIA AVENUE OCOEE FL	☒ Delete	TD EARL Polly 8027 Sun Vista Way ORLANDO, FLA. 32822	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROTZMAN, DARRELL 4913 PETROFF AVENUE ORLANDO FL 32812	☐ Delete	200003155522--8 -03/06/00--01002--003 *****61.25 *****61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PERRINE, STEVE 103 HOLDEN AVENUE ORLANDO FL 32839	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LASSITER, BOB 1406 19TH STREET ORLANDO FL 32805	☒ Delete	DH 2/23	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~TD~~ ~~EARL D Polly~~ ~~8027 Sun Vista WAY~~ ~~Orl FL 32822~~	☐ Delete		☐ Change ☐ Addition

12. 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.

SIGNATURE: D. SIGNATURE REQUIRED 2/25 Ord 1-5-2000 407 852 52
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #