## 2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## **DOCUMENT#722226**

FILED Dec 20, 2004 Secretary of State

Entity Name: THE COLLEGE PARK PRESBYTERIAN CHURCH OF ORLANDO, INC.

Current Principal Place of Business: New Principal Place of Business:

118 EAST PAR STRET ORLANDO, FL 32804

Current Mailing Address: New Mailing Address:

118 EAST PAR STRET ORLANDO, FL 32804

FEI Number: 59-0993365 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EALY, MARY 214 SPANISH OAK TRAIL LONGWOOD, FL 32779 US

**OFFICERS AND DIRECTORS:** 

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

## Electronic elginatare el registerea

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: HEFFNER, LEE Name: ROBINSON, JAMES A

 Address:
 850 MAURY RD
 Address:
 914 BALTIMORE DR.

 City-St-Zip:
 ORLANDO, FL 32804
 City-St-Zip:
 ORLANDO, FL 32810

Title: VDT ( ) Delete Title: TRS (X) Change ( ) Addition Name: SMITH, WILLIAM Name: SMITH, WILLIAM Address: 5613 HOLLOW OAK RD Address: 5613 HOLLOW OAK RD

Address: 5613 HOLLOW OAK RD
City-St-Zip: ORLANDO, FL 32808

Address: 5613 HOLLOW OAK RD
City-St-Zip: ORLANDO, FL 32808

ORLANDO, FL 32808

Title: SD () Delete Title: SD (X) Change () Addition
Name: JORDAN, MARGARET Name: WADSWORTH, DONALD J

Address: 3307 CONVAY GARDENS ROAD Address: 8217 SHAY LYNN CT.
City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32810

Title: ( ) Delete Title: VPD ( ) Change (X) Addition

 Name:
 Name:
 MCMASTER, MARVIN

 Address:
 Address:
 1647 S. ATLANTIC DR.

 City-St-Zip:
 City-St-Zip:
 APOPKA, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DONALD WADSWORTH SD 12/20/2004