

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State

03-03-2002 90131 033 ****61.25

DOCUMENT # 723272

1. Entity Name

HOPE LUTHERAN CHURCH OF EAST ORANGE COUNTY, FLORIDA, INCORPORATED

Principal Place of Business

Mailing Address

COUNTY FLORIDA INCORPORATED
 2600 NORTH DEAN ROAD
 ORLANDO FL 32817

COUNTY FLORIDA INCORPORATED
 2600 NORTH DEAN ROAD
 ORLANDO FL 32817

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

59-1405446

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

KALLINA, EDMUND F
 2817 ROSE MOSS LN.
 ORLANDO FL 32807

Name **Joseph Viola**

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

2948 Cypress Chase Lane

City

Oviedo,

FL

Zip Code

32765

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

Joseph Viola

Joseph Viola, President

2/12/02

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

(NOTE: Registered Agent signature required when re-registering)

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 ☒ Delete
 NAME **KALLINA, EDMUND F**
 STREET ADDRESS **2817 ROSE MOSS LN**
 CITY-ST-ZIP **ORLANDO FL 32807**

TITLE ☐ Delete
 NAME **VINCENT, CRYSTAL M**
 STREET ADDRESS **20408 MELLVILLE ST.**
 CITY-ST-ZIP **ORLANDO FL 32833**

TITLE ☒ Delete
 NAME **BURNS, RICHARD**
 STREET ADDRESS **432 ROCHESTER ST**
 CITY-ST-ZIP **OMEDO FL 32765**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
 NAME **Joseph Viola President**
 STREET ADDRESS **2948 Cypress Chase Lane**
 CITY-ST-ZIP **Oviedo, FL 32765**

TITLE ☐ Change ☒ Addition
 NAME **Jeffrey W. Miller Treasurer**
 STREET ADDRESS **14621 Riviera Pointe Drive D**
 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 ☐ Change ☐ 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)(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:

Jeffrey W. Miller
JEFFREY W. MILLER

2/12/02

(407) 629-6010 x108

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone

CR2E037 (9/01)