

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 735837

1. Corporation Name

UNITY CHURCH OF CHRISTIANITY, INC.

Principal Place of Business

5162 POPE ROAD
ORLANDO FL 32810

Mailing Address

5162 POPE ROAD
ORLANDO FL 32810

FILED
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90030 034 ****61.25



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 4801 Clarcona Ocoee Rd		26 4801 Clarcona Ocoee Rd		05/17/1976	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2141375	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		Trust Fund Contribution	
24		29		30	

9. Name and Address of Current Registered Agent

HILL, SHADOW
4024 LAKE UNDERHILL RD
SUITE S
ORLANDO FL 32803

10. Name and Address of New Registered Agent

81 Name **Janice Richer Wuerfel**
82 Street Address (P.O. Box Number is Not Acceptable)
413 E. Bay Avenue
83 **Longwood**
84 City **FL** 85 Zip Code **32750**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Janice Richer Wuerfel* **Janice Richer Wuerfel, President** **2/2/99**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CANOURA, SUSAN	1.2 NAME	
STREET ADDRESS	1 W ROSEVEAR ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	
TITLE	V <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARTIN, MARC J	2.2 NAME	Jeanette Francisco
STREET ADDRESS	930 CLEVELAND STREET EAST	2.3 STREET ADDRESS	6700 Crescent Ridge Road
CITY-ST-ZIP	APOPKA FL 32703	2.4 CITY-ST-ZIP	Orlando FL 32810
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEAY, LINDA	3.2 NAME	Dan Cain
STREET ADDRESS	6941 CRESCENT RIDGE ROAD	3.3 STREET ADDRESS	8224 Banyan Blvd
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	Orlando FL 32819
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WARREN, JOHN	4.2 NAME	Reg Lyle
STREET ADDRESS	1167 SARAH LN	4.3 STREET ADDRESS	107 Duncan Trail
CITY-ST-ZIP	CASSELBERRY FL 32707	4.4 CITY-ST-ZIP	Longwood FL 32779
TITLE	P <input checked="" type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HILL, SHADOW	5.2 NAME	Kimbrough Jennings
STREET ADDRESS	4024 LAKE UNDERHILL RD #S	5.3 STREET ADDRESS	399 Winchester Place
CITY-ST-ZIP	ORLANDO FL 32803	5.4 CITY-ST-ZIP	Longwood, FL 32779
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHER, JANICE	6.2 NAME	Janice Richer Wuerfel
STREET ADDRESS	201 S TRIPLET LK DR	6.3 STREET ADDRESS	413 E. Bay Avenue
CITY-ST-ZIP	CASSELBERRY FL 32707	6.4 CITY-ST-ZIP	Longwood FL 32750

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Janice Richer Wuerfel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/99

Date

407-295-9181

Daytime Phone #

CR2E037 (1/98)

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