2002 UNIFORM BUS DOCUMENT # 736370 1. Entity Name	Ma	FILED May 22, 2002 8:00 am Secretary of State				
THE SHENANDOAH BAPTIST CHURCH, INCORPORATED			05-22-2002 90083 018 ****61.25			
Principal Place of Business	Mailing Address		_			
7308 PERSHING AVE E ORLANDO FL 32822	7308 PERSHING AVE E ORLANDO FL 32822			2		
2. Principal Place of Business	3. Mailing Address	lailing Address				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State	City & State		4. FEI Number			
Zip 🖞 Country	Zip	Country	5. Certificate of State	2319203 <b>88.75</b> /		
6. Name and Address of Curren	t Registered Agent	<u> </u>	7. Name and Addre	ss of New Registered Agent	ired	
NORRIS, KEITH 7332 E PERSHING AVNEUE	Street Address	Street Address (P.O. Box Number is Not Acceptable)				
ORLANDO FL 32822		City		FL Zip Ca	ode	
8. The above named entity submits this statement f	for the purpose of changing its	registered office or register	ered agent, or both, in the			
SIGNATURE	nt and title if applicable. (NOTI	E: Registered Agent signature require	əd when reinstating)	DATE		
FILE NOW: FEE IS \$61.25	<b>9.</b> Election Car Trust Fund C	npaign Financing	\$5.00 May Be Added to Fees	Make Check Payabl Department of Sta		
10. OFFICERS AND D	· · · · · · · · · · · · · · · · · · ·	11.	ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS		
ITTLE PD NAME NORRIS, KEITH STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32822	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	noitibbA	
ITLE V IAME PEYNADO, ASTON	Delete	TITLE NAME STREET ADDRESS		Change	Addition	
Intel® Address         4225         GULFSTREAM         BAY         CT.           ITY-ST-ZIP         ORLANDO         FL         32822	Delete	CITY-ST-ZIP				
AME POPE, JAMES W TREET ADDRESS 5900 LYLE ST		STREET ADDRESS		Change	Addition	
ITY-ST-ZIP ORLANDO FL 32807 ITLE AME CORNELL, RHONDA 4722 STURBRIDGE CIR. ITY-ST-ZIP ORLANDO FL 32812	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u> </u>	Change	Addition	
ITLE S AME ROGALINSKI, KATHY TREET ADDRESS 3601 OGLETREE CT ITY-ST-ZIP ORLANDO FL 32812	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition	
TLE D AME CARPENTER, ED IREET ADDRESS 3609 PONCEAU TY-ST-ZIP ORLANDO FL 32812	Delete	TITLE NAME STREET.ADDRESS CITY-ST-ZIP		Change	Addition	
<ol> <li>I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee empi- changed, or on an attachment with an address,</li> </ol>	owered to execute this report a		same legal effect as it m. 7, Florida Statutes; and th	ade under oath; that I am an office hat my name appears in Block 10 o	r or director or Block 11 if	
	PRINTED NAME OF SIGNING OFFICER OF	ED PR DIRECTOR	<u>4-29-02</u>	407-282-55 Daytime Phone #	61	