

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90200 002 ****61.25

DOCUMENT # 738331

1. Corporation Name

PARKWAY BAPTIST CHURCH OF ORLANDO, INC.

Principal Place of Business
**9000 LAKE UNDERHILL RD.
ORLANDO FL 32825**

Mailing Address
**9000 LAKE UNDERHILL RD
ORLANDO FL 32825**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		03/10/1977	
22 City & State		27 City & State		4. FEI Number	
23 Zip Country		28 Zip Country		59-1734375	
24		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
SOLOMON, VERNON 100 KASEY DRIVE ORLANDO FL 32807				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 Zip Code	

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TPTR <input type="checkbox"/> DELETE	1.1 TITLE	TR <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SOLOMON, VERNON	1.2 NAME	Haas, Bill
STREET ADDRESS	100 KASEY DRIVE	1.3 STREET ADDRESS	714 Pond Pine Ct.
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	Orlando, FL 32825
TITLE	VSTR <input type="checkbox"/> DELETE	2.1 TITLE	TR <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KNISLEY, EUGENE L.	2.2 NAME	Kugler, Kevin
STREET ADDRESS	7031 MODERNA WAY	2.3 STREET ADDRESS	1095 Meller Way
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	Orlando, FL 32825
TITLE	TR <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIRKLAND, WILLIAM I.	3.2 NAME	
STREET ADDRESS	7633 GILCHRIST DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	
TITLE	TR <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GENTRY, CHARLES J.	4.2 NAME	
STREET ADDRESS	9348 RAVEN DELL ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	
TITLE	TR <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHARP, ROGER	5.2 NAME	
STREET ADDRESS	2721 HARGILL DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	
TITLE	CTR <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STRICKLAND, DANIEL E.	6.2 NAME	
STREET ADDRESS	840 PINE MEADOWS RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.37(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:

Eugene Knisley
Eugene Knisley

Eugene Knisley

4/5/99

(407) 273-0511

CR2E037 (11/98)