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Secretary of State

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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # 738331

1. Corporation Name
PARKWAY BAPTIST CHURCH OF ORLANDO, INC.

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



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		03/10/1977	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1734375	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip Country		Zip Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
24		29		30	
				\$5.00 May Be Added to Fees	

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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 119.07(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 empowerers.

SIGNATURE: *Eugene Knisley* **Eugene Knisley** 4/5/99 (407) 273-0511
 Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (11/98)