2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 742583** 1. Entity Name LOCKWOOD MISSIONARY BAPTIST CHURCH OF ORLANDO, I NC. Principal Place of Business Mailing Address

FILED Apr 23, 2002 8:00 am Secretary of State

04-23-2002 90374 013 ****61.25

TITLE: VD. Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME NAME	16224 OLD CHENEY HIGHWAY ORLANDO FL 32833-2783		16224 OLD CHENEY HIGHWAY ORLANDO FL 32833-2783							
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Zip Country Zip Country 5. Continents of Status Desired Set 38.75 Additional Fee Perspection 6. Name and Address of Current Registered Agent Name MULINS, RANDY 13808 BBLIES LANE ORLANDO FL 38288 City FL Zip Code City FL Zip	Suite, Apt	. #, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
See Name and Address of Current Registered Agent 6. Name and Address of Current Registered Agent Name MULIUNS, RANDY 13808 BELIES LANE ORLANDO FL 32226 6. Trial above named entity submits this starament for the purpose of changing its registered agent, or both, in the state of Florida. SIGNATURE Registered Agent PL City FL Zip Code Make Check Payable to Department of State Registered agent, or both, in the state of Florida. SIGNATURE Registered Agent or price of incidenced agent and site if agrificable. PRICE INDW: FEE IS \$51.25 9. Election Campagn Financing Trust Fund Contribution. AMME Trust Fund Contribution. PRIEST, JOE 455 MCLAIN LANE OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PRIEST, JOE 455 MCLAIN LANE OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PRIEST, JOE 455 MCLAIN LANE OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PRIEST, JOE 455 MCLAIN LANE OFFICERS AND DIRECTORS ITTE WWW. WARTON, EARL RAY II WARTON, EARL RAY II WARTON, EARL RAY II MAKE JONES, GENE TANNER, JOHN ASS PHILLIPS ROAD CHANGES FULLIPS ROAD CHANGES F	City & Sta	te	City & State				FO 0040407			
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E. Trid 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										
8. Trid 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 Supraws byed or preset name of registered agent and this if applicable (NOTE Registered Agent sprawle resulted when retreating) DATE					City	, .	FI	Zip Cod	le	
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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.

Emulsins Pres, 4-11-02 32)-662-3549

Date Dayline Phone #