NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

OCUMENT # 763646

Corporation Name

KOREAN PRESBYTERIAN CHURCH (PRESBYTERIAN CHURCH U.S.A.) OF ORLANDO, INC.

incipal Place of Business

Principal Place of Business

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

27

03 N. HIAWASSEE RD. RLANDO FL 32818

Suite, Apt. #, etc.

5503 N. HIAWASSEE RD. ORLANDO FL 32818

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90012 028 ****61.25 09-10-1999 90008 025 ****61.25

6 614176 - 90008 - 75 6

3. Date Incorporated or Qualifed

06/11/1982

59-2221433

4. FEI Number



City & State	•	City & State			5. Certifcate of Status Desired Fee Required
Zip	Country	Zip	Cor	untry	6. Election Campaign Financing \$5.00 May Be
	25	29	30		Trust Fund Contribution Added to Fees
	9. Name and Address of Current I			T	10. Name and Address of New Registered Agent
				81 Name	GENE ICE
CHONG HA SO				82 Street	Address (P.O. Box Number is Not Acceptable)
2906 ABEY CT				83 / >	AL ATELA COT
WINTER PARK FL 32712				130	04 ORTGGA ST WINTER GPRINGS FL 85 Zip Code 32708
				84 City (621 756 GDO146 & EL 85 Zip Code
				<u> </u>	WINTER GPRINGS FL 32708
. Pursuant t	o the provisions of Sections 617.0502	and 617.1508, Florid: Florida, Such chang	a Statutes, the a	above-named d by the corpo	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
Pursuant to the provisions of Sections of 7.5002 and of 7.500. Folida Statutes, the advertance comporation's board of directors. I hereby accept the appointment as 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.					
GNATURE	/ m	n			
GINATURE _	Signature, typed or printed name of registered agent a	nd title if applicable.			required when reinstating) DATE
	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
E	S	□ DE	LETE 1.1 T	TLE	Change Addition
ME	KIM, PAUL Y		1.2 N	IAME	KIM, PAULY SHUI GRAVA OA BUD
REET ADDRESS	8441 GRANADA BLVD		1.3 S	TREET ADDRESS	JULI GRADADI
Y-ST-ZIP	ORLANDO FL 32836		1,4 0	UTY-ST-ZIP	BRLANDO, FL 32836
1-31-4IF	TD	. 🔲 DE			S.! Change □ Addition
ME	LEE, GENE H		22 N	IAME	LEC GENE L
REET ADDRESS	1304 ORTEGA ST	•		TREET ADDRESS	1304 of TEAA CT
	WINTER SPRINGS FL			CITY-ST-ZIP	1304 750 =001665 FL 32208
Y-ST-ZIP		¹ ☑ DE			1304 ORTEGAST. TE 322=8 WINTER SPRINGS TE 322=8 TO Change MAddition
LE	VD DAVE W	₹		IAME	CHURG, YOUNG K.
ME.	CHANG, DAVE W				ZCOU AREY CT
REET ADDRESS	2900 SUNBITTEN ST			TREET ADDRESS	2404 ABEY CT WINTER PARK, FL 32792 Change Addition
Y-ST-ZIP	WINDERMERE FL	 Bane		CITY-ST-ZIP	Change Addition
LE .	D	X D€			Byu w, SAWS H.
ΝE	SO, CHONG HA			NAME	
REET ADORESS	2242 LAKE MARION AVE		4.3 S	TREET ADDRESS	001000000000000000000000000000000000000
Y-ST-ZIP	APOPKA FL			ΣITY-ST-ZIP	08 MN00 Fr 32818
LE		☐ DE			Change Addition
ME			5.2 N	IAME	
REET ADDRESS			5.3 S	TREET ADDRESS	5
Y-ST-ZIP			5.4 0	CITY-ST-ZIP	
LE		□ DE	LETE 6.1 T	TILE	☐ Change ☐ Addition
ME .			6.2 N	IAME	
REET ADORESS			6.3 9	STREET ADDRESS	
1			6.4 0	JTY-ST-ZIP	
Y-ST-ZIP	estifut that the information cumplied with	this filing does not a			od in Section 119.07(3)(i), Florida Statutes. I further certify that the information

I hereby ceruly mat the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. I have early 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:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

22E037 (5/99)

Applied For

Not Applicable