

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766053

FILED  
Jan 08, 2008  
Secretary of State

**Entity Name:** ORLANDO COMMUNITY CHURCH, INC.

**Current Principal Place of Business:**

816 BROADWAY AVENUE  
ORLANDO, FL 32803

**New Principal Place of Business:**

**Current Mailing Address:**

816 BROADWAY AVENUE  
ORLANDO, FL 32803

**New Mailing Address:**

**FEI Number:** 59-2229962

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HOLBROOK, DAVID L  
3117 EDGEWATER DR  
ORLANDO, FL 32804 US

**Name and Address of New Registered Agent:**

The 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: UNGARO, DON  
Address: 1731 OAKMONT LANE  
City-St-Zip: ORLANDO, FL

Title: TD ( ) Delete  
Name: WOLFF, FRANK  
Address: 9652 WOODMONT PLACE  
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Delete  
Name: ROGERS, BOB  
Address: 221 OAK PARK PL  
City-St-Zip: CASSELBERRY, FL 32707

Title: D ( ) Delete  
Name: CHRISTIANSEN, JOHN  
Address: 1314 GOLFVIEW  
City-St-Zip: ORLANDO, FL 32804

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN CHRISTIANSEN

D

01/08/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date