

5/14

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 18, 2002 8:00 am
Secretary of State

05-14-2002 90331 041 ****61.25

DOCUMENT # N00000001448

1. Entity Name

FAITH BAPTIST CHURCH FOUNDATION, INC.

Principal Place of Business

Mailing Address

**4470 W COLONIAL DRIVE
ORLANDO FL 32808****4470 W COLONIAL DRIVE
ORLANDO FL 32808**

J J J J J

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3658030

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEGER, FRANCKEL
4470 W COLONIAL DRIVE
ORLANDO FL 32808

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEGER, FRANCKEL 4470 W COLONIAL DRIVE ORLANDO FL 32808	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Francel Leger 1217N Pine Hills Rd Orlando FL 32808	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CELITANT, DUPAS 4470 W COLONIAL DRIVE ORLANDO FL 32808	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dupas celitaul 4843 Bennington Pl Orlando FL 32808	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PELTRO, JEAN 4470 W COLONIAL DRIVE ORLANDO FL 32808	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	jean Peletro 4444 5 PLO grounds FL 306 OR FL 32839	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GASPARD, SANOR 4470 W COLONIAL DRIVE ORLANDO FL 32808	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Gaspard Sanor 222 N Hiawasse Rd Orlando FL 32835	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GELIS, DELVA 4470 W. COLONIAL DRIVE ORLANDO FL 32808	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	gelis Delva 3302 Knights Bridge Orlando FL 32808	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PAUL, BETHANIE 4470 W. COLONIAL DRIVE ORLANDO FL 32808	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Paul Bethanie 626 greys Ferry Rd Orlando FL 32811	☐ Change ☒ Addition

12. 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 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 information required.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

April 26 - 02

CR2E037 (9/01)