APPROVED

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000006802 010CT-3 PM 2:51 ORLANDO KOREAN COMMUNITY CHURCH, INC. SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE FI ORIDA 4700 GODDARD AVENUE 4700 GODDARD AVENUE ORLANDO FL 32804 ORLANDO FL 32804 278065 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 3675*886* Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Střeet Address (P.O. Box Number is Not Acceptable) SONG, WAN K 520 HUNGTCLUB BOULEVARD APOPKA FL 32703 City 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. SICNATURE. Signature, typed or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE લ 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be After September 12, 2001, min. will be \$236.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PASTOR/ Director TITLE Delete Change Addition TITLE 8 KIM, BONG SOO D. NAME STREET ADDRESS STREET ADDRESS 535 South SUNDANCE DR. CITY-ST-ZIP CITY-ST-ZIP LAKE MARY , FL 32746 TITLE Delete TITLE ☐ Change Addition Director KIM, BYUNG D. "D" 3044 FOXATIL CTV # 109 NAME W STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP APOPKA, FL 32703 TRUSTEE TITI - Change Addition TITLE Delete NAME NAME - -464 Jurdan Stuart Cir. #106 ApopkA, FL 32703 (W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Director Change Addition ☐ Delete TITLE KIM, HAESOOK NAME NAME 535 S. SUNDANCE Dr. W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE MARY, FL 32746 Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TIRE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 like empowered.

SO NG

SIGNATURE: