## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 04, 2001 8:00 am Secretary of State **DOCUMENT # N00458** 1. Entity Name ORLANDO FREEWILL BAPTIST CHURCH, INC. 04-04-2001 90135 040 \*\*\*\*70.00 Principal Place of Business Mailing Address 214 DRENNEN RD 214 DRENNEN ROAD ORLANDO FL 32806-6956 ORLANDO FL 32806 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1866014 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 Street Address (P.O. Box Number is Not Acceptable) DAVIS, PAUL A. 214 DRENNEN RD. ORLANDO FL 32806 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. SIGNATURE Stronature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Pavable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☑ Delete TITI F ☐ Change ☐ Addition TITLE KLINGENSMITH, JAMES, JR. NAME NAME 189 MCCOY DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP LAKE PLACID FL Delete TDS MOIS Addition Change TITLE TITLE REYNOLDS, ISA BARBARA J. DAVIS NAME NAME 5464 PARKWAY DR.... STREET ADDRESS STREET ADDRESS 214 DRENNEN ROAD 32806 CITY-ST-ZIF ORLANDO, FL 00000 CITY-ST-ZIP ORLANDO FLORIDA PCD TITLE ☐ Delete TITLE Change ☐ Addition DAVIS, PAUL A. NAME NAME STREET ADDRESS 214 DRENNEN RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL Detete ☐ Change Addition TITLE PEACOCK, FAYE DAVIS NAME WANDA STREET ADDRESS 221 OPAL DR. STREET ADDRESS 214 DRENNEN ROAD CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP ORLANDO FLORIDA 32806 Delete TITLE TITLE Change ■ Addition BOWEN, JOHN R. NAME NAME STREET ADDRESS 2222 KIWI TRAIL STREET ADDRESS CITY-ST-7IP CLERMONT FL CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME DAVIS, W.B. NAME STREET ADDRESS 214 DRENNEN RD. STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-7IP

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.

**SIGNATURE**