

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000057

FILED  
Mar 08, 2007  
Secretary of State

Entity Name: THE CHURCH OF THE RESURRECTION, INC.

**Current Principal Place of Business:**

250 KILLARNEY DRIVE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

250 KILLARNEY DRIVE  
WINTER PARK, FL 32789

**New Mailing Address:**

FEI Number: 01-0738924      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MCDANIEL, DAVID S FR.  
250 KILLARNEY DRIVE  
WINTER PARK, FL 32789      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      (X) Delete  
Name: COSTANTINO, FRANK BISHOP  
Address: 2017 MERCY DRIVE  
City-St-Zip: ORLANDO, FL 328085629

Title: D      ( ) Delete  
Name: MCDANIEL, DAVID S  
Address: 250 KILLARNEY DRIVE  
City-St-Zip: WINTER PARK, FL 32789

Title: D      ( ) Delete  
Name: MCDANIEL, RACHEL  
Address: 250 KILLARNEY DRIVE  
City-St-Zip: WINTER PARK, FL 32789

Title: D      ( ) Delete  
Name: NEE, AARON  
Address: 22 S. CENTRAL AVENUE  
City-St-Zip: APOPKA, FL 32703

Title: D      (X) Delete  
Name: DRUEDING, DAVID  
Address: 300 KILLARNEY DRIVE  
City-St-Zip: WINTER PARK, FL 32789

**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: D      (X) Change ( ) Addition  
Name: NEE, AARON  
Address: 143 SOUTHERN PECAN CIRCLE #202  
City-St-Zip: WINTER GARDEN, FL 34787

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

I hereby certify that the information supplied with this filing does not qualify for the 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: FR. DAVID S. MCDANIEL

D

03/08/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date