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May 06, 2003 8:00 am
Secretary of State
05-06-2003 90053 016 ****75.00

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000001232

1. Entity Name
UNITED IN THE FAITH CHRISTIAN CENTER OF ORLANDO, FLORIDA, INC.

Principal Place of Business	Mailing Address
8866W LANCASTER ROAD ORLANDO, FL 32829	8866W LANCASTER ROAD ORLANDO, FL 32829

2. Principal Place of Business	3. Mailing Address
908 4th Street	P.O. Box 593299
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando FL.	City & State: Orlando FL
Zip: 32859 Country: ORange	Zip: 32859-3299 Country: ORange

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 59-3732654 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PAGAN, EVA
7623 SANDLAKE POINT LOOP #101
ORLANDO, FL 32809

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Eva Pagan DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☑ $5.00 May Be Added to Fees

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP PAGAN, EVA 7623 SANDLAKE POINT LOOP #101 ORLANDO, FL 32809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OV BARRIOS, ERNESTO 1219 W. POINTVILLAS BLVD. #104 WINTER GARDEN, FL 34787	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS FERNANDEZ, RAMON 149 RANDIA DR. ORLANDO, FL 32807	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT MONTALVO, LUCY 1219 W. POINT VILLAS BLVD. #104 WINTER GARDEN, FL 34787	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PAGAN, AIDA 7689 SANDLAKE POINT LOOP 103 ORLANDO, FL 32809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jose SERRANO 13523 Texas Wood Dr. ORlando, FL. 32824	☐ Change ☑ Addition

CR2E037 (10/02)

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: Eva Pagan - EVA PAGAN - DP (407)816-2051
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #