6/3/

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2002 8:00 am
Secretary of State
06-03-2002 91195 020 ****70.00

DOCUMENT # N01000003641

1. Entity Name

ORANGE COUNTY COMMUNITY AND FAITH-BASED COALITIO N, INC. ✓

Principal Place of Business	Mailing Address
830 KLONDIKE ST. WINTER GARDEN FL 34787	830 KLONDIKE ST. WINTER GARDEN FL 34787

[redacted]

DO NOT WRITE IN THIS SPACE

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 ☐ 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
WILDER, CHARLIE MAE 1007 STUCKI TERRACE WINTER GARDEN FL 34787	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

After September 13, 2002, min. will be $236.25.

9. 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	D HUMPHREY, KIM 7919 MAGNOLIA HOMES RD. ORLANDO FL 32810	☒ Delete	D Hezekiah Bradford 21 W. 13th. Street Apopka, Fl. 32703	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PARRISH, LAVERNE W 1741 PEACHWOOD LN ORLANDO FL 32818	☒ Delete	D Mylva Pearson M.D. 6388 Silver Star Rd. Suite 2G Orlando Fl. 32808	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILDER, CHARLIE MAE 1007 STUCKI TERRACE WINTER GARDEN FL 34787-4296	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GONZALEZ, MARIA PO BOX 2723 WINDERMERE FL 32819	☒ Delete	D Richard Newberger 17811 Westbay Court Winter Garden, Fl. 34787	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEZERRA, CELIA 4972 EAGLESMERE DR. ORLANDO FL 32819	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PERIOZA, ABIGAIL 3313 S. GOLDENROD RD. ORLANDO FL 32819	☒ Delete		☐ Change ☐ Addition

CR2E037 (4/02)

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: Charlie Mae Wilder Charlie Mae Wilder July 30, 2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

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

#N01000003641
40855

DOCUMENT #

1. Entity Name
Orange County Community And Faith-Based Coalition, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
830 Klondike Street
Suite, Apt. #, etc.
City & State
Winter Garden, Fl.
Zip 34787
Country U.S.A.

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3724762 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name Charlie Mae Wilder
Street Address (P.O. Box Number is Not Acceptable)
1007 Stucki Terrace
City Winter Garden, FL Zip Code 34787-4296

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 Charlie
Signature required of printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when filing) DATE

FEE IS $61.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE P NAME STREET ADDRESS CITY-ST-ZIP	Hezekiah Bradford, Jr. 21 W. 13th. Street Apopka, Fl. 32703	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	Charlie Mae Wilder 1007 Stucki Terrace Winter Garden, Fl. 34787-4296	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE S NAME STREET ADDRESS CITY-ST-ZIP	Mulva Pearson, M.A. Ocoee, Fl. 34761	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE T NAME STREET ADDRESS CITY-ST-ZIP	Richard Newberger 17811 Westbay Court Winter Garden, Fl. 34787	TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Charlie Mae Wilder Charlie Mae Wilder 5/24/02 407-656-8345
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment 40855

#N01000003671

July 30, 2002

Department of State
Katherine Harris, Secretary
P.O. Box 1500
Tallahassee, FL 32302

Dear Miss Harris,

This is to inform you of non receipt of the information that was sent for Corrections, as stated by a representative in your office.
Please accept the corrected report in this mailing.
This renewal was sent and Check #6691 for it has Cleared my bank, for the amount of $70.00.

Thank you for your Consideration.

Charlie Mae Wilder,
Director, Vice President

Attachment

NO1 60000364/1

ORANGE COUNTY COMMUNITY AND FAITH-BASED COALITION, INC.

D Hezekiah Bradford, Jr.
21 W. 13th. Street
Apopka, Florida 32703

D. Charlie Mae Wilder
1007 Stucki Terrace
Winter Garden, Florida 34787

D Mulva Pearson
6388 Silver Star Road Suite 2G
Orlando, Florida 32808

D. Richard Neuberger
17811 West Bay Court
Winter Garden, Florida 34787