2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000006930

Entity Name: STANDING IN THE GAP MINISTRIES OF ORLANDO, INC.

FILED Mar 23, 2002 8:00 AM Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
6229 WINEGAR GYMNASIUM ORLANDO, FL				
Current Mailing Address:		New Mailing Address:		
P.O. BOX 58014 ORLANDO, FL				
FEI Number:	FEI Number Applied For (X)	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and	Name and Address of New Registered Agent:	
OUTING, DAVIE 633 SAGO LANI ORLANDO, FL	E			
The above name in the State of Fl		oose of changing i	ts registered office or registered agent, or both,	
SIGNATURE:				
_	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	TRUS () Change (X) Addition LEWIS, CHADDRICK SR 4160 PERSHING POINTE APT.1 ORLANDO, FL 32822	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	TRUS () Change (X) Addition RANDALL, KENNETH SR 5674 CENTURY 21 BLVD APT.35 ORLANDO, FL 32807	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	PRES () Change (X) Addition OUTING, DAVID L 633 SAGO LANE ORLANDO, FL 32811	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition JOHNSON, SEAN C PO BOX 450991 KISSIMMEE, FL 34745	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	TRUS () Change (X) Addition HALL, JOHN A SR 1625 MERCY DR ORLANDO, FL 32811	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID L. OUTING PRES 03/23/2002