2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2007 08:00 A
Secretary of State

DOCUMENT # N01000008573

1. Entity Name
THE ALLIANCE FOR THE DISTRIBUTED CHURCH, INC.

Principal Place of Business	Mailing Address
530 DOG TRACK RD. LONGWOOD, FL 32750-6546	5125 ADANSON ST SUITE 500 ORLANDO, FL 32804

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02272007 No Chg-NP CR2E037 (4/06)

4. FEI Number
01-0584557
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PAGE, THOMAS P
5125 ADANSON ST.
SUITE 500
ORLANDO, FL 32804

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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)

Filing Fee is $61.25
Due by May 1, 2007

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

000000654290
03/13/07-80056-012 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LOY, RANDALL DR.
STREET ADDRESS	3093 TIMPANA PT
CITY-ST-ZIP	LONGWOOD, FL 327793108
TITLE	D
NAME	LOY, JULIE
STREET ADDRESS	3093 TIMPANA PT
CITY-ST-ZIP	LONGWOOD, FL 327793108
TITLE	D
NAME	KOLDENHOVEN, KEN
STREET ADDRESS	104 SPRING LAKE LN
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 327146507
TITLE	D
NAME	KOLDENHOVEN, LINDA
STREET ADDRESS	104 SPRING LAKE LN
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 327146507
TITLE	D
NAME	HUNTER, JOEL DR.
STREET ADDRESS	203 SAVANNAH PK LOOP
CITY-ST-ZIP	CASSELBERRY, FL 32707
TITLE	D
NAME	HUNTER, BECKY
STREET ADDRESS	203 SAVANNAH PK LOOP
CITY-ST-ZIP	CASSELBERRY, FL 32707

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ 2/27/07 407/629-4811
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #