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

Mar 10, 2005 8:00 am Secretary of State **DOCUMENT #** N01102 1. Entity Name 03-10-2005 90143 027 ****61.25 Orlando Central Baptist Church DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 2700 Weston Lane 2700 Weston Lane Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Orlando Fl Orlando Fl. 32810 32810 593015268 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 32810 USA 32810 USA Fee Required 7. Name and Address of Current Registered Agent Sung Mun DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE City Orlando 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 5/18/02 9. Election Campaign Financing Make Check Payable to FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Initial or Amended UBR Added to Fees OFFICERS AND DIRECTORS TITLE President /Deacon TITLE CR2E037B (12/02 NAME NAME Sung Mun STREET ADDRESS STREET ADDRESS 2700 Weston Lane Orlando, Fl. 32810 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Secretary / treasurer NAME NAME Soo Nam Park STREET ADDRESS STREET ADDRESS 2700 Weston Lane CITY-ST-ZIP CITY-ST-ZIP Orlando, Fl 32810 TITLE TITLE Deacon NAME Moo Boo Kim STREET ADDRESS STREET ADDRESS DO NOT WRITE 2700 Weston Lane CITY-ST-ZIP CITY-ST-ZIP Orlando, Fl 32810 TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAMÉ NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED