

FILED
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Secretary of State

04-30-2003 90153 013 ****61.25

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

DOCUMENT # N02000000314			
1. Entity Name FILADELPHIA MISSIONARY SOCIETY, INC.			
Principal Place of Business 1016 ARIZONA AVE. LOT #4 BOX #8 SAINT CLOUD, FL 34769		Mailing Address 1016 ARIZONA AVE. LOT #4 BOX #8 SAINT CLOUD, FL 34769	
2. Principal Place of Business 414 E. PINE ST SUITE 302 ORLANDO, FLORIDA 32801		3. Mailing Address P.O. Box 2307 ORLANDO, FLORIDA 32802	
4. EFL Number 95-308-3783		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent DELGADO, ABEL 1014 FLORIDA PARKWAY KISSIMMEE, FL 34743		7. Name and Address of New Registered Agent JOSE L. CASTRO 414 E. PINE ST. SUITE 302 ORLANDO, FL 32801	
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: <i>X Jose Luis Castro</i> DATE: 4/25/03			
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		10. Check Here if Making Changes ☐	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: PD NAME: CASTRO, JOSE L STREET ADDRESS: 1016 ARIZONA AVE. LOT #4 BOX #8 CITY-ST-ZIP: SAINT CLOUD, FL 34769		TITLE: PD NAME: CASTRO JOSE L STREET ADDRESS: 414 E. PINE ST SUITE 302 CITY-ST-ZIP: ORLANDO FL 32801	
TITLE: STD NAME: CASTRO, ROSARIO STREET ADDRESS: 1016 ARIZONA AVE. LOT #4 BOX #8 CITY-ST-ZIP: SAINT CLOUD, FL 34769		TITLE: STD NAME: CASTRO ROSARIO STREET ADDRESS: 414 E. PINE ST SUITE 302 CITY-ST-ZIP: ORLANDO, FL 32801	
TITLE: D NAME: CRUZ, NORMA STREET ADDRESS: 212 MAYOR'S LANE APT. H CITY-ST-ZIP: KISSIMMEE, FL 34743		TITLE: D NAME: COLORADO MARIA STREET ADDRESS: 414 E. PINE ST SUITE 302 CITY-ST-ZIP: ORLANDO, FL 32801	
TITLE: ☐ Delete		TITLE: ☐ Change ☐ Addition	
TITLE: ☐ Delete		TITLE: ☐ Change ☐ Addition	
TITLE: ☐ Delete		TITLE: ☐ Change ☐ Addition	
TITLE: ☐ Delete		TITLE: ☐ Change ☐ Addition	
TITLE: ☐ Delete		TITLE: ☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(d), Florida Statutes. I further certify that the information disclosed on this report or supplemental report is true and accurate to the best of my knowledge and belief, and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with a listing like indicated.			
SIGNATURE: <i>X Jose Luis Castro</i>		DATE: 4/24/03 407-872-3839	