2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03022

FILED May 02, 2005 Secretary of State

Entity Name: UNION PARK CHRISTIAN CHURCH, INC.

Current Principal Place of Business:		New Principal Place of Business:	
	DEAN ROAD O, FL 32817		
Current N	Mailing Address:	New Maili	ing Address:
	DEAN ROAD O, FL 32817		
El Number: 59-3378075 FEI Number Applied For() FEI In accordance with s. 607.193(2)(b), F.S., the corporation did not receival and Address of Current Registered Agent:		Number Not Applicable() Certificate of Status Desired() ve the prior notice. Name and Address of New Registered Agent:	
IELSON, 40 KRAF	JOHN	Name and	Address of New Registered Agent.
	e named entity submits this statement for the purpose te of Florida.	e of changing	its registered office or registered agent, or both
IGNATU	RE:		
	Electronic Signature of Registered Agent		Date
DFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
tle: ame: ddress: ity-St-Zip:	D () Delete MASON, GARY 3514 KRAMER LANE ORLANDO, FL 328066620	Title: Name: Address: City-St-Zip:	() Change () Addition
le: ime: ldress: ty-St-Zip:	D () Delete UNGRUHE, ANTHONY J 21708 HOBBY HORSE LN CHRISTMAS, FL 32709	Title: Name: Address: City-St-Zip:	() Change () Addition
tle:	D () Delete MCCARTHY, THOMAS R JR. 5036 GOLDENROD PLACE ROAD NORTH	Title: Name: Address: City-St-Zip:	D (X) Change () Addition CULLEN, CRAIG 10638 CROCUS STREET ORLANDO, FL 32825
ame: ldress:	WINTER PARK, FL 32792	City-St-Zip.	
ame: ddress: tty-St-Zip: ttle: ame: ddress: ity-St-Zip:	WINTER PARK, FL 32792 T () Delete MADDOX, MARY BETH 382 TWELVE OAKS DRIVE WINTER SPRINGS, FL 32708	Title: Name: Address: City-St-Zip:	T (X) Change () Addition MADDOX, MARY BETH 2672 HAZEL GROVE LANE OVIEDO, FL 32766
ame: ldress: ty-St-Zip: tle: ame: ldress:	T () Delete MADDOX, MARY BETH 382 TWELVE OAKS DRIVE	Title: Name: Address:	MADDOX, MARY BETH 2672 HAZEL GROVE LANE

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: GARY MASON D 05/02/2005