

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03022

FILED
Apr 23, 2007
Secretary of State

Entity Name: UNION PARK CHRISTIAN CHURCH, INC.

Current Principal Place of Business:

2119 N. DEAN ROAD
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

2119 N. DEAN ROAD
ORLANDO, FL 32817

New Mailing Address:

FEI Number: 59-3378075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADDOX, JEFFREY D
2672 HAZEL GROVE LANE
OVIEDO, FL 32766 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NELSON, JOHN
Address: 240 KRAFT DRIVE
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: COLE, MICHAEL
Address: 10708 HARKWOOD BLVD
City-St-Zip: ORLANDO, FL 32817

Title: D () Delete
Name: CULLEN, CRAIG
Address: 10638 CROCUS STREET
City-St-Zip: ORLANDO, FL 32825

Title: T () Delete
Name: MADDOX, MARY BETH
Address: 2672 HAZEL GROVE LANE
City-St-Zip: OVIEDO, FL 32766

Title: D () Delete
Name: CLAPPER, CLIFF
Address: 18930 BELVEDERE RD
City-St-Zip: ORLANDO, FL 32820

Title: D () Delete
Name: HENSLEY, THOMAS
Address: 3555 FOX HOLLOW
City-St-Zip: ORLANDO, FL 32829

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BOZARTH, BRYAN
Address: 5160 LOMA VISTA CIRCLE
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JOHN NELSON

D

04/23/2007

Electronic Signature of Signing Officer or Director

Date