


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 08:00 A
Secretary of State

DOCUMENT # N04000007089	
1. Entity Name REFUGE TOUCH CHURCH, INC.	

Principal Place of Business 2700 COOLRIDGE AVENUE ORLANDO, FL 32804	Mailing Address 2700 COOLRIDGE AVENUE ORLANDO, FL 32804
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DO NOT WRITE IN THIS SPACE



04242007 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-1696085	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HOWARD AND HODGES 720 RODEL COVE LAKE MARY, FL 32746
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee Is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	D
NAME	MUNDLE, LASCELLES
STREET ADDRESS	1396 VICKERS LAKE DRIVE
CITY-ST-ZIP	OCOE, FL 34761
TITLE	D
NAME	MUNDLE, LORAIN
STREET ADDRESS	1396 VICKERS LAKE DRIVE
CITY-ST-ZIP	OCOE, FL 34761
TITLE	D
NAME	GRIFFIN SR, EZEKIEL L
STREET ADDRESS	1304 CRAWFORD AVENUE
CITY-ST-ZIP	ST CLOUD, FL 34769
TITLE	T
NAME	JACKSON, PHYLLIS
STREET ADDRESS	5681 ARTE COURT
CITY-ST-ZIP	ORLANDO, FL 32808
TITLE	S
NAME	CHAMPAGNE, MICHELLE
STREET ADDRESS	203A PEITH COURT
CITY-ST-ZIP	WINTER SPRINGS, FL 32708
TITLE	D
NAME	MUNDLE, LAVAL
STREET ADDRESS	1396 VICKERS LAKE DRIVE
CITY-ST-ZIP	ORLANDO, FL 34761

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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: Lascelles Mundle Senior Pastor 4/22/07 407-761 0001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone