

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010148

FILED
Jan 15, 2009
Secretary of State

Entity Name: HEART OF ORLANDO WORSHIP CENTER INC.

Current Principal Place of Business:

P.O. BOX 951616
LAKE MARY, FL 32795

New Principal Place of Business:

208 E. COLONIAL DR
ORLANDO, FL 32801

Current Mailing Address:

P.O. BOX 951616
LAKE MARY, FL 32795

New Mailing Address:

FEI Number: 56-2473389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIDINGS, HOWARD J
600 RINEHART ROAD
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

RIDINGS, ROSELLA A REV.
2140 BLUE IRIS PLACE
LONGWOOD, FL 32779 US

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: ROSELLA RIDINGS

01/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RIDINGS, HOWARD J
Address: P.O. BOX 951616
City-St-Zip: LAKE MARY, FL 32795

Title: ST () Delete
Name: RIDINGS, ROSELLA A
Address: P.O. BOX 951616
City-St-Zip: LAKE MARY, FL 32795

Title: D () Delete
Name: FERRELL, JAMES F
Address: 649 PENINSULAR DR
City-St-Zip: LAKE LAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: REV (X) Change () Addition
Name: RIDINGS, ROSELLA A
Address: 2130 BLUE IRIS PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: DR (X) Change () Addition
Name: FERRELL, JAMES F
Address: 4467 ETHAN LANE, UNIT 103
City-St-Zip: ORLANDO, FL 32814

Title: REV (X) Change () Addition
Name: FLEMING, JACK
Address: 1120 CLAPP SIMMS DULA ROAD
City-St-Zip: ORLANDO, FL 32832

I hereby certify that the information supplied with this filing does not qualify 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: JAMES F. FERRELL

DR.

01/15/2009

Electronic Signature of Signing Officer or Director

Date