

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006782

FILED
Jan 16, 2012
Secretary of State

Entity Name: BRIDGE CHRISTIAN FELLOWSHIP ORLANDO, INC.

Current Principal Place of Business:

273 BELLAGIO CIRCLE
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

273 BELLAGIO CIRCLE
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 16-1727811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BART MALONE
304 E GREENTREE LANE
LAKE MARY, FL 32746 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: PD
Name: MALONE, BART A
Address: 304 E GREENTREE LANE
City-St-Zip: LAKE MARY, FL 32746 US

Title: VD
Name: MALONE, KIMBERLEY S
Address: 304 E GREENTREE LANE
City-St-Zip: LAKE MARY, FL 32746 US

Title: STD
Name: DOVE, BARRY W
Address: 304 E GREENTREE LANE
City-St-Zip: LAKE MARY, FL 32746 US

Title: DR
Name: DOVE, BARRY W
Address: 304304 E GREENTREE LANE
City-St-Zip: LAKE MARY, FL 32746 US

Title: DR
Name: BCFO
Address: 304 E GREENTREE LANE
City-St-Zip: LAKE MARY, FL 32746 US

Title: DR
Name: BCFO
Address: 304 E GREENTREE LANE
City-St-Zip: LAKE MARY, FL 32746 US

I hereby 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 all other like empowered.

SIGNATURE: BART MALONE

PD

01/16/2012

Electronic Signature of Signing Officer or Director

Date