

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006851

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Entity Name:** BRIDGE CHRISTIAN FELLOWSHIP ORLANDO, INC., MILLENNIA

**Current Principal Place of Business:**

1681 EE WILLIAMSON RD  
LONGWOOD, FL 32779

**New Principal Place of Business:**

1125 LASCALA DR  
WINDERMERE, FL 34786

**Current Mailing Address:**

P.O. BOX 520026  
LONGWOOD, FL 32752

**New Mailing Address:**

**FEI Number:** 80-0211202      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MALONE, BART  
1681 EE WILLIAMSON RD  
LONGWOOD, FL 32779    US

**Name and Address of New Registered Agent:**

MALONE, BART  
304 E. GREENTREE LANE  
LAKE MARY, FL 32746    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: BART MALONE

01/07/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: ROBLES, JOEY  
Address: 1125 LASCALA DR  
City-St-Zip: WINDERMERE, FL 32786

Title: D  
Name: MALONE, BART A  
Address: 304 E. GREENTREE LANE  
City-St-Zip: LAKE MARY, FL 32746

Title: V  
Name: MORALES, ADIANIS  
Address: 1125 LASCALA DR  
City-St-Zip: WINDERMERE, FL 32786

Title: V  
Name: MALONE, KIMBERLEY  
Address: 304 E. GREENTREE LN  
City-St-Zip: LAKE MARY, FL 32746

Title: DST  
Name: DOVE, BARRY W  
Address: 304 E. GREENTREE LN  
City-St-Zip: LAKE MARY, FL 32746

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

01/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date