

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08226

FILED
Apr 27, 2007
Secretary of State

Entity Name: THE CHURCH OF CHRIST OF MID-TOWN, INC.

Current Principal Place of Business:

2021 BRUTON BLVD.
ORLANDO, FL 32805 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 550185
ORLANDO, FL 32855 US

New Mailing Address:

FEI Number: 59-2773690 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTERS, J. WILLIAM, II
1500 S. SEMORAN BLVD.
ORLANDO, FL 32807 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 () Delete
Name: WILSON, MORGAN
Address: 1876 BEEWOOD COURT
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: NORMAN, WILLIAM E
Address: 1197 KIRK ST
City-St-Zip: ORLANDO, FL 32808

Title: S () Delete
Name: DAFFIN, BERNICE DEXTER
Address: 3417 LEWIS CT
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: TUCKER, JAMES
Address: 4807 CASERTA ST
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: HARRIS, LENTON
Address: 5600 SILVER STAR RD 309
City-St-Zip: ORLANDO, FL 32808

Title: D (X) Delete
Name: LOFTON, CHRISTOPHER
Address: 2719 CUPRIN LN
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GRIFFIN, BENJAMIN
Address: 1291 MONTHEATH CIRCLE
City-St-Zip: OCOEE, FL 34761

Title: PD (X) Change () Addition
Name: WILSON, MORGAN
Address: 1876 BEEWOOD COURT
City-St-Zip: ORLANDO, FL 32818

Title: D (X) Change () Addition
Name: NORMAN, WILLIAM E
Address: 1197 KIRK STREET
City-St-Zip: ORLANDO, FL 32808

Title: S (X) Change () Addition
Name: DAFFIN, BERNICE DEXTER
Address: 3417 LEWIS COURT
City-St-Zip: ORLANDO, FL 32805

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

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

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: MORGAN WILSON

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date