FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

SIGNATURE:

DOCUMENT # NO8444

(4)

FULL GOSPEL CHURCH OF ORLANDO INCORPORATED

Principal Place of Business Mailing Address								
7850 BATES ROAD		78	7850 BATES ROAD				3. Date Incorporated or Qualified	
ORLANDO FL 32807		O	ORLANDO FL 32807				03/29/1985	
							4. FEI Number Applied For	
							59-2515336 Not Applicable	
2. Principal Place of Business			2a. Mailing Address				5. Certificate of Status Desired \$8.75 Additional	
21			26				Fee Required	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & State			City & State				7. Is this nonprofit corporation a homeowners association?	
Zip	Country		Zìp	Count	гу		8. This corporation owes or has paid the current year Intangible	
24				30	0		Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent	
				8	11	Name		
BYUN, MOSES HYUK					2	Street Addre	ess (P.O. Box Number is Not Acceptable)	
2817 GLYN STREET ORLANDO FL 32807					3			
ONLAND	JO FL 32001			_		011	85 Zip Code	
					4	City	FL!	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named conflice or registered agent, or both, in the State of Florida. Such change was authorized by the corpor agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							oration submits this statement for the purpose of changing its registered	
agent. I a	m familiar with, and accept the obl	igations c	f, Section 617.0503, Fi	orida Statut	es	ine corporation	orra poard of directors, Thereby absorpt the appointment as registered	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.	Signature, typed or printed name of registered in OFFICERS A			E. Registered A	Ager	nt signature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	IND DILLE	DELETE	1,1 1171	E		Change Addition	
NAME	BYUN, MOSES HYUK		_	1.2 NAM				
STREET ADDRESS	2817 GLYN STREET			1.3 STRE	ET /	ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32807			1.4 CITY		l		
TITLE				2.1 TITLE		Change Addition		
NAME	SUH, SANG W		2.2 NAM	E				
STREET ADDRESS	3804 GATLIN RIDGE DR.			2,3 STRE	ET /	ADORESS		
CITY-ST-ZIP	ORLANDO FL		2, 4 CITY	/-\$	T- ZIP			
TITLE	TD		DELETE	3.1 TITU	E		☑ Change ☐ Addition	
NAME	LEE, JONG MIN		3.2 NAM	3.2 NAME		tun Villa Blud.		
STREET ADDRESS	1700 WOODBURY RD. #20	01		3.3 STRE	ET /	ADDRESS /	0545 Sun Villa Blud. DRLANDO, TC 328/7	
CITY-ST-ZIP	ORLANDO FL			3.4. CfT\	/ - 8	IT-ZIP	DRLANDO, FC 328/7	
TITLE	•		☐ DELETE	4.1 TITLE	E		☐ Change ☐ Addition	
NAME				4. 2 NAM	Æ			
STREET ADDRESS				4.3 STRE	ET /	ADDRESS		
CITY-ST-ZIP				4.4 CITY		T- ZIP		
TITLE			☐ DELETE	5.1 TITU			Change Addition	
NAME				5,2 NAM	_			
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP			- I or or	5.4 CITY		T-ZIP	Change Addition	
TITLE			☐ DELETE	6.1 TITU	-		L. Change L. Addition	
NAME				6.2 NAM				
STREET ADORESS				6.3 STRE	ET /	ADDRESS		

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changes, or an an attachment with an addyes.