## **2001 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # N16858** 

1. Entity Name

THE ALLIANCE CHURCH OF KISSIMMEE, INC.

	•			
1485	MILL	SLO	UGH	RD
KISSI	MMEE	FL	3474	4

Principal Place of Business

Mailing Address

1485 MILL SLOUGH RD

NIGGIMMEE F	L 34/44	NIGGIMMEE PL 34/44						
							( <b>8</b> () <b>1</b> ( <b>8</b> )  ( <b>18</b> )	
2. Principal F	2. Principal Place of Business 3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State City & State			4. FEI Numbe	4. FEI Number		pplied For	1	
					59-2884295	N	ot Applicable	]
- <sup>Zip</sup>	Country	Zip	Country		of Status Desired	\$8.75 Ade	ditional	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New Registered			1
			Name					1
GRAF, JA	MES .		Street Address (P.O. Box Number is Not Acceptable)					
	NTRY CROSSING CT		<u> </u>		<del></del>			-
	E FL 34744							
			City		FL	Zip Cod	le	
8. The above	named entity submits this statement for	the purpose of changing its re	aistered office or re	egistered agent, or bot	h. in the state of Florida.			1
	,		•	<b>9</b>				
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: F	Registered Agent signature	required when reinstating)	DATE			
		· · · · · · · · · · · · · · · · · · ·	· · ·					-
	FILE NOW:	9. Election Campaign F	inancing	\$5.00 May Be	Make Check I	Pavable to	<b>,</b>	
	FEE IS \$61.25	Trust Fund Contribut	· · ·	Added to Fees	Department		,	
10.	OFFICERS AND DIR		11.	ADDITIONS/CHA	ANGES TO OFFICERS AND DI			18
TITLE NAME	VD Czian, Paul	☐ Delete	TITLE Name			☐ Change	☐ Addition	10/00
STREET ADDRESS	2530 MILL RUN BLVD		STREET ADDRESS					
CITY-ST-ZIP	KISSIMMEE FL 34744		CITY-ST-ZIP					E037
TITLE	TD	☐ Delete	TITLE			Change	☐ Addition	12
NAME	PENCE, BOB		NAME			_ '	_	C
STREET ADDRESS	232 STRATHMORE CIRCLE	يغ رب يعمرونين رب	STREET ADDRESS	and the second of the second	a of the same of the same			
City-st-zip	KISSIMMEE FL 34744	·	CITY-ST-ZIP					]
TITLE	D DANIERO BANKEI	Delete	TITLE	S/D	- 1 1	Change	💢 Addition	
NAME	SANDERS, DANIEL		NAME	Carmen	Cintrop			
STREET ADDRESS CITY-ST-ZIP	127 TIJUANA DR		STREET ADDRESS		ndhover Br			
	KISSIMMEE FL 34743		CITY-ST-ZIP	Orlando,	FC 32819	,		-
TITLE NAME	HANRAHAM, BARBARA	Delete	TITLE NAME	James k	, ,	☐ Change	Addition	-
STREET ADDRESS	2622 EINWOOD DR		STREET ADDRESS	14238 La	rd Burclay Dr			
CITY-ST-ZIP	KISSIMMEE FL 34758-2113	,N	CITY-ST-ZIP		FL 32837			
TITLE	D	☐ Delete	TITLE		<u> </u>	☐ Change	Addition	1
NAME	KLINGENSMITH, PAM		NAME					1
STREET ADDRESS	1537 TINA LANÉ		STREET ADDRESS					
CITY-ST-ZIP	KISSIMMEE FL 34744		CITY-ST-ZIP					
TITLE	D	☐ Delete	TITLE			Change	☐ Addition	]

12. I hereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FORNES, JENNIFER

**KISSIMMEE FL 34743** 

192 HIDDEN SPRINGS CIR

SCAMINE MESTRED UMES RGRAF

1/19/01

(407) 846 -1959