

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90094 024 ****70.00

DOCUMENT # N19534

1. Entity Name

GENESIS CHRISTIAN CENTER OF ORLANDO, FLORIDA, INC.



Principal Place of Business

5501 BOGGY CREEK RD.
ORLANDO FL 32824
US

Mailing Address

2506 BROOSTONE DR.
KISSIMMEE FL 34744

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

2506 BROOKSTONE DR.

Suite, Apt. #, etc.

City & State

City & State
KISSIMMEE FLA

Zip

Country

Zip

34744

Country

USA

4. FEI Number

59-2781766

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERBERENA, OSVALDO
829 ALASKA WOODS LANE
ORLANDO FL 32824

7. Name and Address of New Registered Agent

Name OSVALDO BERBERENA

Street Address (P.O. Box Number is Not Acceptable)

2506 BROOKSTONE DRIVE

City

KISSIMMEE

FL

Zip Code

34744

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

OSVALDO BERBERENA

(NOTE: Registered Agent signature required when reinstating)

1.25.06

DATE

FILE NOW: FEE IS \$61.25

Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	BERBERENA, OSVALDO	
STREET ADDRESS	2506 BROOKSTONE DRIVE	
CITY-ST-ZIP	KISSIMMEE FL 34744	

TITLE	SD	<input type="checkbox"/> Delete
NAME	BERBERENA, RAQUEL T.	
STREET ADDRESS	2506 BROOKSTONE DRIVE	
CITY-ST-ZIP	KISSIMMEE FL 34744	

TITLE	TD	<input type="checkbox"/> Delete
NAME	BERROCAL, AIDA	
STREET ADDRESS	3100 BURLINGTON DR.	
CITY-ST-ZIP	ORLANDO FL	

TITLE	DA	<input type="checkbox"/> Delete
NAME	RIVERA, DEBBIE	
STREET ADDRESS	99 WILDWOOD CT	
CITY-ST-ZIP	KISSIMMEE FL 34743	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		

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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE:

[Signature]

OSVALDO BERBERENA

1.25.06

(407) 859-2840