## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # N27841

(8)

MODAUNG	CTAD DA	TOITO	CHURCH	ΛF	ORLANDO,	INC.
MI IRNING	SIAK NA	ו ומווץ	UNUNUN	UL.	UNLANUU	1110.

MORNIN	IG STAR BAPTIST CHURCH	OF ORLANDO, INC.						
Principal Place	of Business	Mailing Address			i jadiinat ask jibii idakt tarii araat iini	#1841 #1841 #1841 #1944 #1	IESI ALBIL JAAL	
118 EAST PAR STREET ORLANDO FL 32804 US		P.O.BOX 585155 ORLANDO FL 32858-5155 US						
					3. Date Incorporated or Qualified	3a. Date of Last F		
					08/11/1988	02/23/19		
2. Principal Pla		2a. Mailing Address			4. FEI Number	h	pplied For lot Applicable	
Morning Star Baptist Church Suite, Apt. #, etc.		Suite, Apr. #, etc.		59-2933322  5. Certificate of Status Desired	\$8.75	\$8.75 Additional Fee Required		
22 1123 Fairbanks Ave.		City & State			6. Election Campaign Financing	\$5.00 May Be		
23 Orlando, F1, 32804		28 Orlando, Florida			Trust Fund Contribution Added to Fees  8. This corporation has liability for intangible tax under s. 199.032,			
Zip	Country	Zip	Counti	-	8. This corporation has liability for inta	ngibie tax under s. Yes ☑ No	199.032,	
24 32804	25   USA 9. Name and Address of Current	29 32858-5155     Registered Agent	30  US	Α	10. Name and Address of New Regi			
	9. Name and Address of Current	negistarea rigent	8	1 Name			1	
					MIGUEL A CRUZ Address (P.O. Box Number is Not Acceptable)			
SOTO, A			8	2 Street A	orth Lake Blvd. Apt. #50			
	ENIC LAKE DRIVE		В	3	MOTERIA TRIVE DIAMA SPOAT			
l .	ONT TOWNHOMES		L			<b>85</b> Zip	Code	
ORLAND	O FL 32808		8	4 City	Altomonto Coringo	FL 32	701	
11 Pursuant	to the provisions of Sections 617,0502	and 617.1508, Florida Statute	es, the above	e-named co	Altamonte Springs proporation submits this statement for the purpositionard of directors. I hereby accept the appoint	se of changing its re	egistered office	
or register	red agent, or both, in the State of Florid	la. Such change was anthoriz	ed by the co	rporation's	proporation submits this statement for the purpor board of directors. I hereby accept the appoint	Therit as registered	agent. ram	
t .		70 al U			04-08	8-96		
SIGNATURE !	Miguel A. Cruz, Past Signature, typed or printed name of registered agent	and title if an Olican (NC	TE Registered A	gent signature re	equired when reinstating)	DATE	00 111 10	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	Addition	
TITLE	D	DELETE	1.1 TITL	7	AVILES, JOHN	-	L] Addition	
NAME	AVILES, JOHN		1.2 NAM	E	800 HEATHER GLEN CIRCLE			
STREET ADDRESS	800 HEATHER GLEN CIR		1.3 STR	EET ADDRESS	LAKE MARY, FL. 32746-61	131	ļ	
CITY-ST-ZIP	LAKE MARY FL 32746-6131			- ST- ZIP		☐ Change	Addition	
TITLE	D	☐ DELE1E	2 1 TITL		FERNANDEZ, BENJAMIN	C Grange		
NAME	FERNANDEZ, BENJAMIN		2.2 NAN		4812 FIGWOOD LANE			
STREET ADDRESS	4812 FIGWOOD LN		23 STR	EET ADDRESS	•			
CITY-ST-ZIP	ORLANDO FL 32808			Y - ST - ZIP	ORLANDO, FL. 32808	Change	Addition	
TITLE	D	DELETE	3.1 7174		FERNANDEZ, CARMEN M.	<b>35</b> 1 21.21.80	<b>—</b>	
NAME	ROSADAZ, ADA		3.2 NA		4812 FIGWOOD LANE			
STREET ADDRESS	7215 IMMOKALEE CT			EET ADDRESS	ORLANDO, FL. 32808			
CITY - ST - ZIP	ORLANDO FL 32818	. DELETE		Y-ST-ZIP F <b>T</b>	Oldendo, 121 ones	Change	Addition	
TITLE	D	. DELETE	4.1 TITU		GONZALEZ, ADA			
NAME	BURGOS, EDNA S.		4. 2 NA		7215 INMOKALEE COURT			
STREET ADDRESS	2042 VERANDA CIRCLE			EFT ADDRESS	ORLANDO, FL. 32818			
CITY-ST-ZIP	ORLANDO FL	DELETE	5.1 Till	Y-ST-7IP		Change	☐ Addition	
TITLE	D	, OLLIT	5.7 MA		GONZALEZ, ADA	•		
NAME	PAGAN, NYDIA			vic REET ADDRESS	7215 INMOKALEE COURT			
STREET ADDRESS	JOOG OFFICE CO.			Y-ST-ZIP	ORLANDO, FL. 32818			
CITY - ST - ZIP	ORLANDO FL 32808	JOELETE		LE <b>D</b>	GONZALEZ, MARÍA	Change	Addition	
TITLE	D	/ Joecete	6.2 NA		1239 LAS CRUCES DRÍVE	•		
NAME	SARMIENTO, EUGENIO					709		
STREET ADDRESS	149 D SPRINGWOOD CIR		6351	REFT ADDRESS	Winter Springs, FL. 32	700		

CITY-ST-ZIP LONGWOOD FL 32750

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 certify 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 changed, or on an attachment with an address. SIGNATURE: John Aviles President of the Board John Wiley 04-08-96 (407) 324-1126