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Apr 27 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N27841 (8)

1. Corporation Name

MORNING STAR BAPTIST CHURCH OF ORLANDO, INC.



Principal Place of Business Mailing Address
1123 FAIRBANKS AVE (CHURCH) (TEMP) PO BOX 585155
ORLANDO FL 32804 ORLANDO FL 32858-155
US US

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

3. Date Incorporated or Qualified

08/11/1988

4. FEI Number

59-2933322

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CRUZ, MIGUEL A
605 N LAKE BLVD APT 50
BEAUMONT TOWNHOMES
ALTAMONTE SPGS FL 32701

81 Name

Pedro J. Rivera

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

2525 Percy Ave

83

84 City

Orlando

FL

85

Zip Code

32818

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Pedro J. Rivera, Pastor

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

(NOTE: Registered Agent signature required when reinstating)

03-04-98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME AVILES, JOHN
STREET ADDRESS 800 HEATHER GLEN CIR
CITY-ST-ZIP LAKE MARY FL

1.1 TITLE P
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

AVILES, JOHN
800 HEATHER GLEN CIR
LAKE MARY FL.

TITLE V
NAME FERNANDEZ, BENJAMIN
STREET ADDRESS 4812 FIGWOOD LN
CITY-ST-ZIP ORLANDO FL 32808

2.1 TITLE V
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

FERNANDEZ, BENJAMIN
4812 FIGWOOD LN
ORLANDO, FL. 32808

TITLE D
NAME ROSADAZ, ADA
STREET ADDRESS 7215 IMMOKALEE CT
CITY-ST-ZIP ORLANDO FL 32818

3.1 TITLE D S
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

VARGAS, NELLY
1835 Blossom Terr.
ORLANDO, FL. 32839

TITLE T
NAME BURGOS, EDNA S.
STREET ADDRESS 2042 VERANDA CIRCLE
CITY-ST-ZIP ORLANDO FL

4.1 TITLE T
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

GONZALEZ, ADA
7215 IMMOKALEE CT.
ORLANDO, FL. 32818

TITLE D
NAME VARGAS, NELLY
STREET ADDRESS 1835 BLOSSOM TERR
CITY-ST-ZIP ORLANDO FL

5.1 TITLE D
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

FERNANDEZ, CARMEN M.
4812 FIGWOOD LN
ORLANDO, FL. 32808

TITLE D
NAME SARMIENTO, EUGENIO
STREET ADDRESS 149 D SPRINGWOOD CIR
CITY-ST-ZIP LONGWOOD FL 32750

6.1 TITLE D
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

GONZALEZ, MARIA
1239 LAS CRUCES DR.
WINTER SPRINGS, FL. 32708

14. 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 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 changed, or on an attachment with an address.

SIGNATURE: John Aviles, President of the Board

03-04-98 (407) 324-1126

CP2E037 (10/97)