## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N45158

FILED Jan 11, 2007 Secretary of State

**Entity Name:** ORLANDO GRACE CHURCH, INC. **Current Principal Place of Business: New Principal Place of Business:** 650 MAITLAND AVENUE ALTAMONTE SPRINGS, FL 32701 LIS **Current Mailing Address: New Mailing Address:** 650 MAITLAND AVENUE ALTAMONTE SPRINGS, FL 32701 US FEI Number: 59-3086658 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MITCHELL, CHARLES J JR HEFFELFINGER, CURT DR. 165 SPRING CHASE CIRCLE 510 PUERTA COURT ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32701 US US 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. SIGNATURE: CURT HEFFELFINGER 01/11/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CHARLES, MITCHELL J JR. Name: Name: 165 SPRING CHASE CIRCLE Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: HUNT, PAUL Name: Address: 530 BROOKSIDE CIR. Address: City-St-Zip: MAITLAND, FL 32751 US City-St-Zip: Title: () Delete Title: () Change () Addition TRAVELSTEAD, ROBERT Name: Name: 2466 CASTLEWOOD ROAD Address: Address: City-St-Zip: MAITLAND, FL 32751 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: BOWERMAN, KURT Name: Address: 14039 PORTRUSH DR. Address: City-St-Zip: ORLANDO, FL 32828 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CURT HEFFELFINGER RA 01/11/2007