2002 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

3. Mailing Address

1019 S. GOLDWYN AVENUE

ORLANDO FL 32805-4305

DOCUMENT # N45910 1. Entity Name EBENEZER UNITED METHODIST CHURCH OF ORLANDO, INC

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

Principal Place of Business

1019 S. GOLDWYN AVENUE

2. Principal Place of Business

ORLANDO FL 32805-4305

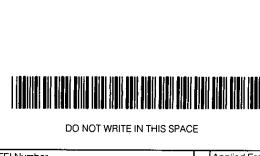
SIGNATURE

FILED Aug 18, 2002 8:00 am Secretary of State

08-18-2002 90140 019 ****61.25

Zip Code

DATE



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Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE			
City & State	City & State			4. FEI Number 59-3011754	Applied For Not Applicable			
Zip Country	Zip _	Cou	ntry	5. Certificate of Status Desired~	¢0.75			
6. Name and Address of Current	Registered Agent		7141-0	7. Name and Address of New Register	ed Agent			
			Name					
BRIGHT, RUDOLPH 3491 COLWYN COURT ORLANDO FL 32812			Street Address (P.O. Box Number is Not Acceptable)					
٠,		ſ	City		Zio Code			

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.

(NOTE: Registered Agent signature required when reinstating)

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	After September 13, 2002, min. will be \$236.25.	9. Election Camp Trust Fund Cor		\$5.0 Added	00 May Be of to Fees	Make Chec Departme	k Payable ent of State	
10.	OFFICERS AND DIRECTORS		11.	ADDITI	ONS/CHANGES	TO OFFICERS AND D	IRECTORS IN	110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCOTT, WILLIE 1406 WILTON AVENUE ORLANDO FL 32805	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD JACKSON, DORIS 6100 HOLIDAY HILL LANE ORLANDO FL 32805	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	e de marie e	nga ing separat	÷	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Johnson, Kim 456 Cottage Hill Road Orlando Fl 32805	☐ Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		•	***	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BRIGHT, RANDOLPH 3491 COLWYN COURT ORLANDO FL 32812	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	tion of the control o	. □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS	,	☐ Delete	TITLE NAME STREET ADDRESS		r -	7:	☐ 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.

CITY-ST-ZIP

7/28/02

407-896-3860