

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 21, 2007 08:00 A
Secretary of State

DOCUMENT # N45910	
1. Entity Name EBENEZER UNITED METHODIST CHURCH OF ORLANDO, INC.	
Principal Place of Business 1224 26TH STREET ORLANDO, FL 32805-5437	Mailing Address 1224 26TH STREET ORLANDO, FL 32805-5437



05142007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3011754	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**BOSTON, JAMES
1224 26TH STREET
ORLANDO, FL 32805-5437**

**DO NOT WRITE
IN THIS SPACE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5-14-07

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCOTT, WILLIE 1406 WILTON AVENUE ORLANDO, FL 32805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRIGHT, JOYCE 1224 26TH STREET ORLANDO, FL 328055437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GARDNER, FELICIA 1224 26TH STREET ORLANDO, FL 328055437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOSTON, JAMES 1224 26TH STREET ORLANDO, FL 328055437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/31/07-80022-004 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-14-07