

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47181

FILED
Apr 10, 2005
Secretary of State

Entity Name: FIRST UNITED CHURCH OF JESUS CHRIST APOSTOLIC, INC., CENTRAL FLORIDA, INC.

Current Principal Place of Business:

550 EAST JACKSON ST
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

550 EAST JACKSON ST
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 59-3137122

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARPENTER, HECTOR
550 EAST JACKSON ST
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAYNES, LESLIE J
Address: 606 FRESNO CT
City-St-Zip: KISSIMMEE, FL

Title: V () Delete
Name: HECTOR, CARPENTER
Address: 139 CAROL REEF CIRCLE
City-St-Zip: KISSIMMEE, FL 34744

Title: D () Delete
Name: NEWBY, EILEEN
Address: 5627 MARVELL AVE
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: BRYAN, PANSY E
Address: 809 VIRGINIA WOODS LN.
City-St-Zip: ORLANDO, FL 32824

Title: D () Delete
Name: GAUBEDON, EARLIA R
Address: 12929 LOUISIANA WDS CT
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: BROWN, ROSETTA
Address: 7935 CAPSTAN PLACE
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HECTOR CARPENTER

V

04/10/2005

Electronic Signature of Signing Officer or Director

Date