

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N48146

1. Entity Name

JESUS IS LORD CHURCH OF ORLANDO, INC.

Principal Place of Business

4845 LAKE SPARLING ROAD
ORLANDO FL 32810
US

Mailing Address

4845 LAKE SPARLING ROAD
ORLANDO FL 32810
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

FILED
Jul 02, 2002 8:00 am
Secretary of State

05-28-2002 91624 018 ****61.25

37247



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3108782

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

QUINONES, ROBERTO
4845 LAKE SPARLING ROAD
ORLANDO FL 32810

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$81.25

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE D
NAME QUINONES, ROBERTO
STREET ADDRESS 4845 LAKE SPARLING ROAD
CITY-ST-ZIP ORLANDO FL 32810 ☐ Delete

TITLE D
NAME QUINONES, AIDA LUZ
STREET ADDRESS 4845 LAKE SPARLING ROAD
CITY-ST-ZIP ORLANDO FL 32810 ☐ Delete

TITLE D
NAME SANCHEZ, JOHN ANTHONY
STREET ADDRESS 3241 FAY COURT
CITY-ST-ZIP DELTONA FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME HECTOR CRUZ
STREET ADDRESS 7147 HICKORY BRANCH CIRCLE
CITY-ST-ZIP ORLANDO FL 32818 ☐ Change ☒ Addition

TITLE D
NAME BRENDA PETERS
STREET ADDRESS 319 OLD DIXIE HIGHWAY
CITY-ST-ZIP APOPKA FL 32703 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/6/02 (407) 522-0570
Date Daytime Phone #

CR2E037 (9/01)