

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000527

**FILED**  
**Mar 10, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA CONFERENCE OF THE UNITED CHURCH OF CHRIST ENDOWMENT FUND, INC.

**Current Principal Place of Business:**

924 N MAGNOLIA AVE  
SUITE 250  
ORLANDO, FL 32803 US

**New Principal Place of Business:**

**Current Mailing Address:**

924 N MAGNOLIA AVE  
STE 250  
ORLANDO, FL 32803 US

**New Mailing Address:**

**FEI Number:** 59-3167868      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SILADI, KENT J  
924 N MAGNOLIA AVE  
STE 250  
ORLANDO, FL 32803 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: TD  
Name: THOMPkins, CHARLAYNE  
Address: 200001 NW 63RD AVENUE  
City-St-Zip: HIALEAH, FL 33015

Title: M  
Name: SILADI, KENT  
Address: 924 N. MAGNOLIA AVE, SUITE 250  
City-St-Zip: ORLANDO, FL 32803

Title: PD  
Name: NUTTER, RONALD  
Address: 3819 NW 40TH STREET  
City-St-Zip: GAINESVILLE, FL 32606

Title: SD  
Name: CHARLAYNE, THOMPkins  
Address: 20001 NW 63RD AVE  
City-St-Zip: HIALEAH, FL 33015

I hereby 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 all other like empowered.

SIGNATURE: KENT J. SILADI

M

03/10/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date