

# 2000 UNIFORM BUSINESS REPORT (UBR)

083000

DOCUMENT # N93000000594

1. Entity Name

FIRST UNITARIAN CHURCH OF ORLANDO, INC.

AMENDED

FILED

00 AUG 31 AM 8:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1901 EAST ROBINSON STREET  
ORLANDO FL 32803  
US

1901 EAST ROBINSON STREET  
ORLANDO FL 32803-5934  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0823945

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIEGFRIED, JEAN  
1901 EAST ROBINSON ST  
ORLANDO FL 32803

Name

Jeffrey A. Wisley

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

First Unitarian Church of Orlando

1901 East Robinson Street

City

Orlando

FL

Zip Code  
32803

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

*Jeffrey A. Wisley* President 2/1/00  
8/25/00

2/1/00

FILE NOW  
FEES \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PT	<input checked="" type="checkbox"/> Delete
NAME	SIEGFRIED, JEAN	
STREET ADDRESS	1321 SUFFOLK RD	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	VT	<input checked="" type="checkbox"/> Delete
NAME	BAKER, BILL	
STREET ADDRESS	4820 FT. CHRISTMAS RD.	
CITY-ST-ZIP	CHRISTMAS FL 32709	
TITLE	VT	<input checked="" type="checkbox"/> Delete
NAME	KELLMAN, NANCY	
STREET ADDRESS	3019 NORTHWOOD BLVD	
CITY-ST-ZIP	ORLANDO FL 32803	
TITLE	TT	<input type="checkbox"/> Delete
NAME	GROSS, JANE	
STREET ADDRESS	9716 FERNWICKE CT	
CITY-ST-ZIP	ORLANDO FL 32819	
TITLE	ST	<input type="checkbox"/> Delete
NAME	DURRANT, SHARON	
STREET ADDRESS	5018 BARTON DR.	
CITY-ST-ZIP	ORLANDO FL 32807	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jeffrey A. Wisley	
STREET ADDRESS	First Unitarian Church; 1901 E. Robinson St	
CITY-ST-ZIP	Orlando, FL 32803	
TITLE	VT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sandra Pollock	
STREET ADDRESS	2021 Oregon Street	
CITY-ST-ZIP	Orlando, FL 32803	
TITLE	VT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carmen Emerson	
STREET ADDRESS	3236 Inverness Court	
CITY-ST-ZIP	Orlando, FL 32806	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

000003390000--2  
-09/12/00--01061--009  
\*\*\*\*\*51.25 \*\*\*\*\*61.25

KE

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: *Jeffrey A. Wisley* 2/1/00 407-306-6872  
8/25/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #