

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90396 042 ****61.25

DOCUMENT # N93000001261

1. Entity Name

THE FIRST CHURCH OF GOD, ORLANDO, FLORIDA, INC.

Principal Place of Business

**431 NORTH SEMORAN BOULEVARD
ORLANDO FL 32807**

Mailing Address

**P O BOX 574345
ORLANDO FL 32857**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1689739

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fees Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BARTELS, MAY
2836 SHERIFF WAY
WINTER PARK FL 32792**

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 \$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 NAME STREET ADDRESS CITY-ST-ZIP	P CHEWNING, CHARLES G 2686 MERRIE OAKS ROAD WINTER PARK FL 32792	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BARTELS, MAY 2836 SHERIFF WAY WINTER PARK FL 32792	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD YODER, MARC 537 SUNRIDGE WOODS BLVD DAVENPORT FL 33837	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LINEBERGE, SUSAN 6300 YELLOWSTONE ST ORLANDO FL 32707	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TATMAN, MARIE 542 HIBISCUS WAY ORLANDO FL 32707	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Kufeldt, Steven J. 14159 Sunriver Dr. Orlando, FL 32828	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Mohr, Brenda 2910 Appaloosa Trl Deltona, FL 32738	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Yoder, Marc 537 Sunridge Woods Blvd Davenport, FL 33837	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Matthews, Yvonne 3500 Shamrock Ct. Orlando, FL 32806	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cross, Mark 77 W Cedarwood Cir Kissimmee, FL 34743	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Goff, Donald 8425 Alveron Avenue Orlando, FL 32817	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: *MAY BARTELS*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/01
Date

(407) 841-8902
Daytime Phone #

CR2E037 (10/00)

2001 Uniform Business Report (UBR).
First Church of God, Orlando, Florida, Inc.

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11. Additions/changes to officers and directors in 10

VD Addition
Carmichael, Rhonda
4025 White Birch Way
Orlando, FL 32817

D Addition
Grant, Carroll
825 Lowell Blvd.
Orlando, FL 32803

D Addition
Griffin, Mary Lou
6220 Matchett Rd
Orlando, FL 32832

D Addition
Watts, Kay
560 Cascade Cir, Unit #100
Casselberry, FL 32707

Handwritten: Affidavit

Handwritten: # N93000001261
D0041909