

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90090 029 ****75.00

DOCUMENT # N94000002174

1. Entity Name

SALEM CHRISTIAN CHURCH, INC.

Principal Place of Business

**3414 HAMLET LOOP
WINTER PARK FL 32792-1724**

Mailing Address

**3414 HAMLET LOOP
WINTER PARK FL 32792-1724**

2. Principal Place of Business

1718 N. Goldenrod Rd.
Suite, Apt. #, etc.

3. Mailing Address

3414 Hamlet Loop
Suite, Apt. #, etc.

City & State

Orlando Fl.

City & State

Winter Park Fl.

4. FEI Number

59-3247503

Applied For

☒ Not Applicable

Zip

32807

Country

Orange

Zip

32792-1724 Seminol

Country

Seminol

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HAWAYEK, SYLVIA F
3414 HAMLET LOOP
WINTER PARK FL 32792-1724**

7. Name and Address of New Registered Agent

Name

Same.

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

Sylvia F. Hawayek

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-7-2001

**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

TITLE **PD** ☐ Delete
NAME **HAWAYEK, SYLVIA F**
STREET ADDRESS **3414 HAMLET LOOP**
CITY-ST-ZIP **ORLANDO FL 32792**

TITLE **V** ☒ Delete
NAME **VILLANUEVA, JOSE**
STREET ADDRESS **103 SOUTH FORSYTH ROAD**
CITY-ST-ZIP **ORLANDO FL 32807**

TITLE **D** ☐ Delete
NAME **SANTANA, RUBON**
STREET ADDRESS **1163 VISTA PALMA WAY**
CITY-ST-ZIP **ORLANDO FL 32825**

TITLE **T** ☐ Delete
NAME **SANTANA, SECUNDINA**
STREET ADDRESS **1163 VISTA PALMA WAY**
CITY-ST-ZIP **ORLANDO FL 32825**

TITLE ☐ Delete
NAME **Miguel Ortiz**
STREET ADDRESS **69405 Long Needle Ct.**
CITY-ST-ZIP **Orlando Fl 32822**

TITLE ☐ Delete
NAME **Elsa Vega**
STREET ADDRESS **10044 Elexus,**
CITY-ST-ZIP **Meadow Sh. Ct 32822**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☒ Addition
NAME **Villanueva Cloud**
STREET ADDRESS **103 South Forsyth Road**
CITY-ST-ZIP **Orlando Fl 32807**

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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:

Sylvia F. Hawayek
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-2001 407-681-9371

Date

Daytime Phone #

CR2E037 (10/00)