

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2005 8:00 am
Secretary of State

03-02-2005 90083 009 ****75.00

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1. Entity Name

SALEM CHRISTIAN CHURCH, INC.



Principal Place of Business

**1117 TUCKER AVE
ORLANDO FL 32807-5148**

Mailing Address

**PO BOX 574937
ORLANDO FL 32857-4937**

50021542

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando Florida

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3247503

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HAWAYEK, SYLVIA F
5758 DELTA STREET
ORLANDO FL 32807**

*2332 Inagua Way
Winter Park, Fl 32792*

7. Name and Address of New Registered Agent

Name *Same.*

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

2332 Inagua Way

City

Winter Park, Fl

FL

Zip Code

32792

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Sylvia F. Hawayek - Sylvia F. Hawayek*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-24-2005

FILE NOW: FEE IS \$61.25

Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution.

☒ **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **HAWAYEK, SYLVIA F**
STREET ADDRESS **PO BOX 574937**
CITY-ST-ZIP **ORLANDO FL 32857-4937**

TITLE **ST** ☐ Delete
NAME **VILLANUEVA, JOSE**
STREET ADDRESS **105 FORSYTH ROAD**
CITY-ST-ZIP **ORLANDO FL 32808**

TITLE **TD** ☐ Delete
NAME **VILLANUEVA, CLARA**
STREET ADDRESS **105 FORSYTH RD**
CITY-ST-ZIP **ORLANDO FL 32808**

TITLE **CPD** ☒ Delete
NAME **SOTO, PABLO**
STREET ADDRESS **5510 CASA BLANCA**
CITY-ST-ZIP **ORLANDO FL 32807**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE ☐ Change ☒ Addition
NAME *Guan E. Gonzalez*
STREET ADDRESS *2327 Monaca Lane*
CITY-ST-ZIP *Orlando Fl. 32825*

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

TITLE ☐ Change ☐ Addition
NAME
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 - Sylvia F. Hawayek*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-2005-4-657-4404

Date

Daytime Phone #