FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATES
Sandra B. Morthen

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

N95000001424 (9)

CORNERSTONE CHURCH OF ORLANDO, FLORIDA. INCORPOR TED

ILD							i dan	ABAR BARU BANDI MBU A	itia dan dar (ea)	
Principal Place of Business Mailing Address										
2333 DONEGAN PLACE ORLANDO FL 32826 2333 DONEGAN PLACE ORLANDO FL 32826 2333 DONEGAN PLACE ORLANDO FL 32826										
							3. Date Incorporated or Qualified	3a. Date of Las	st Report	
2. Principal	Place of Busine	ess	7	a. Mailing Address			03/24/1995			
21				26			4. FEI Number		Applied For	
Suite, Apt	t. #, etc.			Suite, Apt. #, etc.			59-3206012		Not Applicable	
City & State				27			5. Certificate of Status Desired	5. Certificate of Status Desired Fee Required		
City & State				City & State			6. Election Campaign Financing		00 May Be	
	Zip Country			28			Trust Fund Contribution	Trust Fund Contribution Added to Fees		
24	ł	25	29	Zip 1	Counti	У	8. This corporation has liability for in			
9. Name and Address of Current							Florida Statutes	Florida Statutes		
			ount riog	acolou Agent	8	I Name	10. Name and Address of New Re	gistered Agent		
50484	0 D414D D				ا	Name	3			
DOWNS, DAVID R					8:	Street	t Address (P.O. Box Number is Not Acceptable)		
2333 DONEGAN PLACE					83	ļ				
UKLAN	DO FL 32826	5			04	'				
,					84	City		85 Z	ip Code	
11. Pursuant	to the provisio	ons of Sections 61	7 0502 and 6	17 1509 Florido Ctat de		<u></u>			·	
 Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-nar or registered agent, or both, in the State of Florida. Such change was authorized by the corpora familiar with and accept the obligations of, Section 617.0503, Florida Statutes. 							corporation submits this statement for the purpose board of directors. Thereby accept the appoint	se of changing its	registered office	
	MILE AND SCCOP	t the obligations o	ection 617	.0503, Florida Statutes.	,		appoin	1 1 1	a agent. I am	
SIGNATURE	Synature, Noed or	printed name of register	1 2000 200 200	2020.				11196.		
12.			RS AND DIRE		13.	nt signature	required when reinstating)	DATE		
TITLE	PCEO			DELETE	1 1 TITLE		ADDITIONS/CHANGES TO OFFIC			
NAME	DOWNS,	DAVID B	РD		1.2 NAME			☐ Change	Addition	
STREET ADDRESS		NEGAN PLACE				LDDDCcc	1			
CITY - ST - ZIP		D.FL.32826				ADDRESS				
TITLE	VS	U 1 L 32020		DELETE	1.4 CITY - S 2 1 TITLE	1 - ZIP				
NAME	DOWNS,	ALIDIE	٧D		22 NAME			☐ Change	☐ Addition	
STREET ADDRESS		NEGAN PLACE			2 3 STAEEL					
CITY-ST-ZIP		D.EL.32826							ľ	
TIFLE	TREASO	De R	***	DELETE	2 4 CiTY - 3 1 TiTLE	ST-ZIP				
NAME	Charlo	tte Klot	to wor		3 2 NAME		,	Change	☐ Addition	
STREET ADDRESS	10118	Marguery	Dr.		3 3 STREET	ADDRESS			1	
CITY-ST-ZIP	<u>Orlan</u>	ido FZ 3	32826	,	34 CITY-				1	
TITLE				DELETE	4 1 TITLE	II- LIP				
NAME				_	4 2 NAME		Í	☐ Change	☐ Addition	
STREET ADDRESS					4.3 STREET	ADDOCCO				
CITY-ST-ZIP					4.3 STREET				ļ	
TITLE				[]DELETE	5 1 TITLE	i - ZIP				
NAME					5 2 NAME			Change	Addition	
STREET ADDRESS					5 3 STREET	ADDRESS				
CITY-ST-ZIP]	
TITLE				DELETE	5.4 CITY - S	- ZIP				
NAME					6.2 NAME		10000197:	Change	☐ Addition	
STREET ADDRESS					6 3 STREET	ADDOCS	100001871 -06/21/9601049	029		
a. <u>-</u>					o saintti.	MUUNESS	000000000000000000000000000000000000000	. UEU		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SUND M. TOWN DAVID R. DOWNS

3/1/96

381-5700 Daytime Phone