FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUÁL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

CITY-ST-ZIP

TITLE

NAME

N95000002429 (7) DOCUMENT #

ORLANDO RESTORATION CHURCH OF GOD, INC.

Principal Place		Mailing Address	Mailing Address 4548 BANNEKA STREET			- \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
ORLANDO FL ORLANDO FL 32811									
						3. Date Incorporated or Qualified 04/18/1995	3a. Date	of Last Report	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				59-33037	<i>59</i>	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	X 2	\$8.75 Additional Fee Required		
22		27	City & State			2 Starting Commission Figureina		\$5.00 May Be	
City & State		28			Election Campaign Financing Trust Fund Contribution		Added to Fees		
Zip	Country	Zip	Cour	itry		8. This corporation has liability for i	ntangible tax ı	under s. 199.032,	
24	25	29	30			Florida Statutes	Yes N	· 50/C3	
	9. Name and Address of Cu	irrent Registered Agent		1		10. Name and Address of New R	egisterèd Ag	ent	
				81	Name				
	lattie M Rev.			82	Street Addre	ss (P.O. Box Number is Not Acceptab	le)		
	NNEKA STREET		ļ	83					
ORLAND	OO FL 32811		L						
			ĺ	64	City		FL	85 Zip Code	
or registe familiar w	ith, and accept the obligations of, Signature, typed or printed name of registered	agent and title if applicable.	3 S.		11 signature required		DATEM	my Dies	
12.	OFFICERS	S AND DIRECTORS	13.		// ·	DIRECTOR TREASU	OF HS ANIT	Change Addition	
TITLE		DELETE	1.1 10	•	P/17/11.	HISTER HATTIE	AC D	I EV	
NAME			1.2 NA		ÁDORESS 45	48 BANNEKA STR	ret		
STREET ADDRESS					ST-ZIP	PLANDO, FLORIDA	32	3//	
CITY-ST-ZIP		DELETE	2 1 TII	_		ARECTOR -		Change Addition	
NAME			2.2 NA	MI	m	LITON L. COLE!	NAN		
STREET ADDRESS			2.3 ST	REET	TADDRESS 5	DAI STEYR STRE		RIG	
CITY-ST-2IP					ST-ZIP	rlando, florid	<u>نجر را</u>	Change Addition	
TITLE		DELETÉ	3.1 TI				Mey [Change Nuclion	
NAME			3.2 N/		T ADDRESS	RRY COLEMAN	RET		
STREET ADDRESS					ST-ZIP	PLANDO, FINEIR	A 3	2819	
CITY-ST-ZIP		DELETE	4.1 TI		f	9000017			
NAME			4. 2 N	IAME	·	-04/10/96010	J0603	2	
STREET ADDRESS			4.3 S	TREE	T ADDRESS	***61.25			
CITY - ST - ZIP				_	ST-ZIP	, , , , , , , , , , , , , , , , , , , ,	7478	I bange	
TITLE		DELETE	5 t T)			0000017 -04/10/96010	10603	Jamange ∐ Addition	
NAME			52 N			***8.75	,	_	
STREET ADDRESS	5]				ST-ZIP				
City_St_7IP	1		■ 5.4 U	11 f -	⊅i^£IF				

6.1 TITLE

6.2 NAME

CITY-ST-ZIP

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 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 12 or Block 13 if changed, or on an attachment with an address.

DELETE

☐ Change

M.M.

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