

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N95000004322 (2)

1. Corporation Name

EGLISE EBEN-EZER D'ORLANDO INC.



Principal Place of Business

Mailing Address

1045 WEST 26TH STREET  
ORLANDO FL 32805

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ORLANDO FL 32805

3. Date Incorporated or Qualified

09/12/1995

3a. Date of Last Report

N/A

2. Principal Place of Business

2a. Mailing Address

21 2392 West Church Street

26 P.O. Box 550085

4. FEI Number

59-3351309

Applied For

Not Applicable

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23

City & State

ORLANDO FL.

28

City & State

ORLANDO FL.

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

Zip

Country

25 ORANGE

29

Zip

32855

30

ORANGE

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JEAN, MAUREL  
322 ASHBOURNE DRIVE  
ORLANDO FL 32835

81 Name

Same Above

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  DELETE  
NAME JEAN, MAUREL  
STREET ADDRESS 322 ASHBOURNE DRIVE  
CITY-ST-ZIP ORLANDO FL 32835

1.1 TITLE SD  Change  Addition  
1.2 NAME Rosly Gilbert 407, 843-2929  
1.3 STREET ADDRESS 3718 South Rio Grande Ave # R3718  
1.4 CITY-ST-ZIP ORLANDO FL. 32805  Change  Addition

TITLE VD  DELETE  
NAME DERA, CLAUDECE  
STREET ADDRESS 1730 WEST GRANT STREET  
CITY-ST-ZIP ORLANDO FL 32805

2.1 TITLE VD  Change  Addition  
2.2 NAME George William Paul 407, 299-6772  
2.3 STREET ADDRESS 2028 CRICKET DR ORLANDO FL. 32808  
2.4 CITY-ST-ZIP  Change  Addition

TITLE SD  DELETE  
NAME CASSEUS, DIEUSEUL  
STREET ADDRESS 1335 WEST 49RD STREET  
CITY-ST-ZIP ORLANDO FL 32830

3.1 TITLE VD  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE 300001753583  Change  Addition  
5.2 NAME -03/22/96--01003--009  
5.3 STREET ADDRESS \*\*\*75.00  
5.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE 300001753583  Change  Addition  
6.2 NAME -03/22/96--01003--009  
6.3 STREET ADDRESS \*\*\*70.00  
6.4 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 in an attachment with an address.

SIGNATURE:

maurel jean

3-11-96

Date

407, 291-9830

Daytime Phone #

CR2E037 (12/95)

3-12-1996