SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham .

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N96000003303 (2)

CHURCH OF CHRIST AT WEST ORLANDO, INC.

Sep 02 1997 8:00am Secretary of State

|--|

Principal Place of Business Mailing Address									
•		•							
1825 NORTH M ORLANDO FL 3		1825 NORTH MERCY DRIV ORLANDO FL 32808	Æ.						
		011011100 12 9000				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 06/20/1996	3a. Da	te of Last R	leport
2. Principal P				4. FEI Number		✓ Ar	oplied For		
21		26					No	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75		
City & State	^	[27]						equired	
23	8	City & State				6. Election Campaign Financing		\$5.00	
Zip	Country	Zip Country			Trust Fund Contribution	oid the our	_ Added		
24 25		29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
	9. Name and Address of Curren		100			10. Name and Address of New R			11.0
				81 N	lame				
ORR, CHARLES E SR				82 5	troot Adde	ess (P.O. Box Number is Not Accepta	hla)		·
	RTH MERCY DRIVE			02 3	oli eet Addin	ess (P.O. Box Number is Not Accepta	Die)		
ORLAND	O FL 32808			83			•		
				84 (City		FL	65 Zip (Code
11. Pursuant	to the provisions Sections 617.050	2 and 617:1508, Florida Statu	ites, the a	bove-n	amed corp	oration submits this statement for the		L L changing it	s registered
office or r	egistered agent, of both, in the State m familiar with and accept the obliga	of Torida, Such change was	authorize Iorida Stal	d by th	e corporati	oration submits this statement for the ion's board of directors. I hereby acce	pt the appo	intment as	registered
SIGNATURE (CVXX CX			1605.	1 ~~/	E. Dri Sr.	7-31		
SIGNATURE	signally e, 1794 or printed name of epistored age	nt and title if applicable. (NO	TE: Registere		ignature require	ed when reinstating)	DATE		
12.	OFFICERS ANI		13.	·		ADDITIONS/CHANGES TO OFFI			RS IN 12
TITLE	DP OUNDIES S OD	DELETE 1.1		TLE			I	Change	Addition
NAME	ORR, CHARLES E SR.	1		1.2 NAME					
STREET ADDRESS	4803 CASTERA ST.	1,3 :		1.3 STREET ADDRESS					1
CITY-ST-ZIP	ORLANDO FL 32819			TY-ST-Z	IP .				
TITLE	FORTSON, GEORGE	☐ DELETE		2.1 TITLE				Change	Addition
NAME	4585 CASSIUS ST.			2.2 NAME					
STREET ADDRESS	ORLANDO FL 32811			2.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	DS			(TY-ST-Z	CIP			Change	Addition
NAME	WARD, ROGER I	- Deterie	3.1 TI 3.2 N					Cliange	Addition
STREET ADDRESS	1161 CENTER GROVE ST.			rme Treet ade	DE ÉC				
CITY-ST-ZIP	ORLANDO FL 32839								
TITLE	T	☐ DELETE	3.4. U	(TY-ST-Z	ir		-	Change	Addition
NAME	BONNER, TERENCE		4. 2 N					Ontange	Notition
STREET ADDRESS	5922 STRATTON ST.			rreet add	NDEGG.				
CITY-ST-ZIP	ORLANDO FL 32808								
TITLE		☐ DELETE	5.1 TI	TY-ST-ZI	r			Change	Addition
NAME			5.2 N/						
STREET ADDRESS				reet ado	NRESS				
CITY-ST-ZIP			1	TY-ST-ZI					
TITLE		☐ DELETÉ	6.1 Ti		'	······································		Change	Addition
NAME			6.2 N/						
STREET ADDRESS				REET ADD	DRESS				Ì
CITY-ST-ZIP				TY-ST-ZI					
			0.701						

14. If do 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 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 empewered 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 my address.

7.31-90