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

Mailing Address

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Aug 01 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N9600003592 (0)

## ONE ACCORD CHRISTIAN MINISTRIES, INCORPORATED

8721 MERRITMOOR CIRCLE ORLANDO FL 32818		6721 MERRITMOOR CIRCLE ORLANDO FL 32818-2279				
					3. Date Incorporated or Qualified 07/08/1996	3a. Date of Last Report
2. Principal F	Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26		593394717	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		3. Continuate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23	Country	28	Caunt		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation has fiability for Florida Statutes	intangible tax under s. 199.032,  Yes 🛣 No
24 25 29 30 9. Name and Address of Current Registered Agent			101	10. Name and Address of New Registered Agent		
				81 Name		
CHAPMAN, ROBERT L			-	Robert L. Chapman  82 Street Address (P.O. Box Number is Not Acceptable)		
522 RAMSDELL AVENUE			8	Street	2663 Bentley Drive	pie)
ALTAMO		8	3			
			_	4 60		Last Sci Oct
			84	4 City	Deltona	FL   85   Zip Code   32738
11. Rursuant 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						
offlice 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					hapman	30 June 1997
	Signature, typed or printed name of registered again	and title if applicable. (NOTE:	Registered A	gent signature	e required when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI	
TITLE D	Executive Director	PIRECTOR DELETE	1.1 TITLE	•	Board Member	Change L Addition
NAME	Juan parpuena				Trudy Taylor	*** #102
STREET ADDRESS	O'DI HOLLEUMOOL OLLOW				5565 Cinderlane Parkw	ay #193
TITLE <b>D</b>	Orlando, Florida 320	DELETE.	2.1 TITLE		Orlando, Florida	Change Addition
NAME	Board Member Director Liberty Denise Balbuena		2.2 NAME			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP	O'ET HETETERIOUT OFFICE		2. 4 CITY-ST-ZIP		1	
TITLE T	Board Member	DELETE	3.1 TITLE			Change Addition
NAME	Robert L. Chapman		3.2 NAME	<u> </u>		
STREET ADDRESS	2663 Bentley Drive		3.3 STRE	ET ADDRESS		
CITY-ST-ZIP	Deltona, Florida 32	738	3.4. CITY	- ST- ZIP		
TITLE 'T	Board Member	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	Jeffery King		4. 2 NAM	ΙE		
STREET ADDRESS	1598 Royal Oaks Driv			ET ADDRESS		
CITY-ST-ZIP	Apopka, Florida 3270		4.4 CITY			Obacca Files Inc.
TITLE T	Board Member	☐ DELETE	5.1 TITLE			Change Addition
NAME	La-Nisa King	-a.	5.2 NAME			
STREET ADDRESS	1598 Royal Oaks Driv	oopka, Florida 32703		ET ADDRESS	1	
CITY-ST-2IP	Board Member	DELETE	5.4 CITY - 6.1 TITLE			Change Addition
NAME	Dale Jones		6.2 NAME			Print a RA Fri Linguistic
STREET ADDRESS	7184 Forest City Ros	ad #113		- Et address		
CITY-ST-ZIP	Orlando, Florida 328	310	6.4 CITY			
14. I do here	by certify that the information supplied	with this filing does not qualify	for the ex	emption s	stated in Section 119.07(3)(i), Florida Statul	es. 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 19 if changed, or on an attachment with an address.						