FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State
04-29-1999 90002 034 ****70.00

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DOCUMENT # **N96000003592**

1. Corporation Name
ONE ACCORD CHRISTIAN MINISTRIES, INCORPORATED

Principal Place of Business	Mailing Address
6721 MERRITMOOR CIRCLE ORLANDO FL 32818	6721 MERRITMOOR CIRCLE ORLANDO FL 32818

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) Country (30)

3. Date Incorporated or Qualifed: 07/08/1996

4. FEI Number: 59-3394717 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

BALBUENA, JUAN
6721 MERITMOOR CIR
ORLANDO FL 32818

10. Name and Address of New Registered Agent

81 Name
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	S/T	☐ Change ☑ Addition
NAME	BALBUENA, JUAN		1.2 NAME	SANDRA BROWN	
STREET ADDRESS	6721 MERRITMOOR CIRCLE		1.3 STREET ADDRESS	1013 HAMLET DRIVE	
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	MAITLAND FL 32751	
TITLE	D	☐ DELETE	2.1 TITLE	T	☐ Change ☑ Addition
NAME	BALBUENA, DENISE		2.2 NAME	DENNIS LANGFORD	
STREET ADDRESS	6721 MERRITMOOR CIRCLE		2.3 STREET ADDRESS	6338 LIVE WOOD OAK DR.	
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-ST-ZIP	ORLANDO FL 32818	
TITLE	TR	☐ DELETE	3.1 TITLE	T	☐ Change ☑ Addition
NAME	DEPASS, JANET		3.2 NAME	VIOLETA LANGFORD	
STREET ADDRESS	7250 LAZY HILL DR		3.3 STREET ADDRESS	6338 LIVE WOOD OAK DR.	
CITY-ST-ZIP	ORLANDO FL 32818		3.4 CITY-ST-ZIP	ORLANDO FL, 32818	
TITLE	TR	☒ DELETE	4.1 TITLE	T	☐ Change ☑ Addition
NAME	KING, JEFFERY		4.2 NAME	ROBERT CHAPMAN	
STREET ADDRESS	1598 ROYAL OAKS DRIVE		4.3 STREET ADDRESS	4516 RIPTIDE CT	
CITY-ST-ZIP	APOPKA FL		4.4 CITY-ST-ZIP	FT WORTH, TEXAS 76135	
TITLE	TR	☒ DELETE	5.1 TITLE	T	☐ Change ☑ Addition
NAME	KING, LA-NISA		5.2 NAME	TRUDI TAYLOR	
STREET ADDRESS	1598 ROYAL OAKS DRIVE		5.3 STREET ADDRESS	5565 CINDERLANE PKWY	
CITY-ST-ZIP	APOPKA FL		5.4 CITY-ST-ZIP	ORLANDO FL 32808	
TITLE	TR	☒ DELETE	6.1 TITLE	T	☐ Change ☑ Addition
NAME	JONES, DALE		6.2 NAME	TIMOTHY JENKINS	
STREET ADDRESS	1922 WILLIAMS MANOR AVE		6.3 STREET ADDRESS	1142 GREENSTONE BLVD APT 100	
CITY-ST-ZIP	ORLANDO FL 32811		6.4 CITY-ST-ZIP	HEATHROW, FL 32746-5512	

CR2E037 (11/98)

14. I 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 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, with all other like empowered.

SIGNATURE: Juan Balbuena REQUIRED 4/24/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #