2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jul 03, 2000 08:00 AM DOCUMENT # N9600003592 1. Entity Name **Secretary of State** ONE ACCORD CHRISTIAN MINISTRIES, INCORPORATED Principal Place of Business Mailing Address 6721 MERRITMOOR CIRCLE 6721 MERRITMOOR CIRCLE FL ORLANDO FL ORLANDO 32818 32818 2. Principal Place of Business 3. Mailing Address 7401 MOTT AVENUE 6721 MERRITMOOR CIRCLE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For ORLANDO FL ORLANDO FL 59-3394717 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 32810 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BALBUENA BALBUENA 6721 MERITMOOR CIR Street Address (P.O. Box Number is Not Acceptable) 6721 MERITMOOR CIR ORLANDO FL 32818 City Zip Code ORLANDO 32818 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE JUAN BALBUENA 07/03/2000 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) ญ็หญ่≥าเก็ ก็เรียกได้ FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate TITLE ☐ Addition NAME VIOLETA LANGFORD LANGFORD NAME VIOLETA STREET ADDRESS 6338 LIVE WOOD OAK DR. STPEET ADDRESS 6338 LIVE WOOD OAK DR. CITY-ST-ZIP ORLANDO FL32818 CITY-ST-ZIP ORLANDO FL32818 TITLE ☐ Delete D | Change ☐ Addition NAME LANG FORD NAME LANGFORD DENNIS DENNIS D STREET ADDRESS 6338 LIVE WOOD OAK DR STREET ADDRESS 6338 LIVE WOOD OAK DR CITY-ST-ZIP ORLANDO 32818 CITY-ST-ZIP ORLANDO \mathbf{FL} 32818 TITLE ☐ Delete TITLE D/S X Change Addition NAME NAME BROWN SANDRA BROWN SANDRA D/S STREET ADDRESS 1013 HAMLET DR STREET ADDRESS 1013 HAMLET DR CITY-ST-ZIP MAITLAND FL. 32751 CITY-ST-ZIP MAITLAND \mathbf{FL} 32751 TITLE ☐ Delete TITLE XI Change ☐ Addition NAME DEPASS JANET DEPASS JANET STREET ADDRESS 7250 LAZY HILL DR STREET ADDRESS 7250 LAZY HILL DR CITY-ST-ZIF ORLANDO 32818 CITY-ST-ZIP ORLANDO 32818 TITLE ☐ Delete TITLE V/TX Change ☐ Addition NAME BALBHENA DENISE NAR/F BALBUENA DENISE STREET ADDRESS 6721 MERRITMOOR CIRCLE STREET ADDRESS 6721 MERRITMOOR CIRCLE CITY-ST-ZIP ORLANDO FT. CITY-ST-ZIP ORLANDO FT. 32818 TITLE ☐ Delete TITLE XI Change ☐ Addition NAME BALBUENA BALBUENA STREET ADDRESS 6721 MERRITMOOR CIRCLE STREET ADDRESS 6721 MERRITMOOR CIRCLE CITY-ST-ZIP CITY-ST-ZIP ORLANDO

^{12.} 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.