


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 08:00 AM
Secretary of State

DOCUMENT # N97000000581	
1. Entity Name ST. JOHN'S PRESBYTERIAN CHURCH OF ORLANDO, FLORIDA, INC.	

Principal Place of Business 800 JAMAJO BLVD ORLANDO, FL 32803	Mailing Address 800 JAMAJO BLVD ORLANDO, FL 32803
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01242005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2251424	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ESTRADA, LUIS 254 ROBIN ROAD ALTAMONTE SPRINGS, FL 32701
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**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D QUINN, ALLEN 2625 SILVER SPUR LANE ORLANDO, FL 32807
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DILAS, JEAN 414 EAST PINE STREET ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ESTRADA, LUIS 254 ROBIN ROAD ALTAMONTE SPRINGS, FL 32701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ, EDITH 765 PENLON COURT ORLANDO, FL 32807
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KINNARD, JUANITA 2625 NEN ROAD ORLANDO, FL 32817
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D URICH, PAUL L 2142 BANANZA AVENUE WINTER PARK, FL 32792

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IN THIS SPACE**

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04/20/05-80071-014 70.00

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 817, 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.

SIGNATURE: Luis Estrada **LUIS ESTRADA 4-17-05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #