FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9700002800

1. Corporation Name

UNITY INSPIRATIONAL GOSPEL CHOIR, INC.

Principal Place of Business

Mailing Address

3018 MONTE CARLO TR. ORLANDO FL 32805-4354 3018 MONTE CARLO TR. ORLANDO FL 32805-4354

FILED Apr 15, 1999 8:00 am Secretary of State

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— ·	lace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed 05/12/1997		
Suite, Apt.	# etc	Suite, Apt. #, etc.			4. FEI Number	17	Applied For
22	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	27			59-34 51235	1	Not Applicable
City & State	9	City & State			5. Certificate of Status Desired		
Zip 24	Country	Zip 30	Count	гу	6. Election Campaign Financing Trust Fund Contribution		May Be
	9. Name and Address of Current		<u> </u>		10. Name and Address of New Register		
		g	8	1 Name			
HARDRICK	C DAVID I			2 Street Add	dress (P.O. Box Number is Not Acceptable)		
	ITE CARLO TR.		"	Sileet Aut	areas (F.O. Box Number is Not Acceptable)		
	FL 32805-4354		8	3			
5.15.150			8	I4 City		FL 85 Zip	Code
		1047 4500 Ft. H. OL L.	<u> </u>		poration submits this statement for the purpos		te registered
office or F	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was auth	norized b	by the corporat	tion's board of directors. I hereby accept the ap	ppointment as	registered
SIGNATURE	<u> </u>	0.075.0			ired when reinstating) DATE		
12.	Signature, typed or printed name of registered agent		13.	gent signature requi	ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
TITLE	D OFFICERS AND	DELETE	1.1 TITLE			Change	
NAME	HARDRICK, VINELL M	_	1.2 NAM			,	
STREET ADDRESS	3018 MONTE CARLO TR.			ET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32805-4354		1,4 CITY	Į.	·		
TITLE	D	☐ DELETE	2.1 TITLE			☐ Change	B ☐ Addition
NAME	HARDRICK, DAVID J		2.2 NAM	E			
STREET ADDRESS	3018 MONTE CARLO TR.		2.3 STRE	EET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32805-4354	دارا الاستاراجيسي السيسان المترادر	2. 4 CITY	-ST-ZIP			
TITLE	T	☐ DELETE	3.1 11111	:		☐ Change	3 Addition
NAME	HARMON, TAMEKA L		3.2 NAM	E			ł
STREET ADDRESS	3024 HEROLD DR.		3.3 STRE	EET ADORESS		•	
CITY-ST-ZIP	ORLANDO FL 32805		3.4. CITY	-ST-ZIP		· ·	
TITLE	S	☐ DELETE	4.1 TITLE	Ē		Change	Addition
NAME	DEL MAR LOPEZ, CARLA		4. 2 NAM	ME			
STREET ADDRESS	1 1 1		4.3 STRE	EET AODRESS			
CITY-ST-ZIP	ORLANDO FL 32817		4.4 CITY	-ST-ZIP			
TITLE	D	☐ DELETE	5.1 TITLE	- 1		☐ Chang	e
NAME	MCDANIEL, ANNIE R		5.2 NAM				
STREET ADDRESS	718 ARLETTA ST.		1	EET ADORESS			
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32714		5.4 CITY				
TITLE		☐ DELETE	6.1 TITLE		'	Change	e Addition
NAME	·		6.2 NAM				
STREET ADORESS	87 700 75 89		1	EET ADDRESS			
	N. 198 (198 (198		6.4 CITY	-ST-ZIP			

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:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/99 (407)296-620X

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