

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000003417

FILED
Oct 28, 2005
Secretary of State

Entity Name: CHRISTIAN CONGREGATION IN THE UNITED STATES. (ORLANDO LOCALE INC.)

Current Principal Place of Business:

495 N FORSYTH RD
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

495 N FORSYTH RD
ORLANDO, FL 32807

New Mailing Address:

FEI Number: 59-3368267 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GONZALES, JOSE
1105 MCKINNON AVE
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

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: JOSE GONZALES

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: GONZALEZ, JOSE
Address: 1105 MCKINNON AVE
City-St-Zip: OVIEDO, FL 32765

Title: T () Delete
Name: SIMOES, ARSENIO
Address: 3106 RIVER BRANCH CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

Title: S () Delete
Name: ELIAS, VINICIUS
Address: 1528 CANOPY OAKS DR
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SIMOES, ARSENIO
Address: 904 BLUE SAGE ST.
City-St-Zip: CELEBRATION, FL 34747

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VINICIUS ELIAS

Electronic Signature of Signing Officer or Director

S

10/28/2005

Date