## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000004694

FILED Jun 17, 2004 Secretary of State

Entity Name: CORNERSTONE CHAPEL, INC. OF THE CHRISTIAN AND MISSIONARY ALLIANCE OF ORLANDO,

**FLORIDA** 

**Current Principal Place of Business: New Principal Place of Business:** 

3100 S GOLDENROD RD ORLANDO, FL 32822

**Current Mailing Address: New Mailing Address:** 

3100 S GOLDENROD RD ORLANDO, FL 32822

FEI Number: 59-0910355 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WALLACE, BRUCE 8709 CATÉRIAR LN ORLANDO, FL 32829 US

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**OFFICERS AND DIRECTORS:** () Delete () Change () Addition ATHERTON, RICK Name: Name: 12819 DOWNSTREAM CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip: Title: ( ) Delete Title: () Change () Addition CORNERSTONE CHAPEL, Name: Name: Address: 3100 S. GOLDENROD RD Address: City-St-Zip: ORLANDO, FL 32822 US City-St-Zip: Title: () Delete Title: () Change () Addition VACHA, RICHARD Name: Name: 10545 SAILAWAY LN Address: Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: ( ) Delete Title: () Change () Addition WALLACE, BRUCE Name: Name:

8709 CATBRIAR RD Address: Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip:

Title: ( ) Delete Title: () Change () Addition

CORNERSTONE CHAPEL, Name: Name: 3100 S. GOLDENROD RD Address: Address: City-St-Zip: ORLANDO, FL 32822 US City-St-Zip:

Title: () Delete Title: () Change () Addition

CORNERSTONE CHAPEL, Name: Name: Address: 3100 S. GOLDENROD RD Address: ORLANDO, FL 32822 US City-St-Zip: 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: RICHARD VACHA D 06/17/2004