

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90041 034 ****61.25

DOCUMENT # N98000003595

1. Entity Name

DEMARCO MINISTRY INC.



Principal Place of Business

1505 PAGE AVE.
APT 01
ORLANDO FL 32806

Mailing Address

1505 PAGE AVE.
APT 01
ORLANDO FL 32806

30010114

2. Principal Place of Business

Same as above

3. Mailing Address

1505 Page Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO, FLA 32806

City & State

ORLANDO FLA

Zip

32806

Country

ORANGE

Zip

32806

Country

ORANGE

4. FEI Number

59-3537424

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEMARCO, PAT
1505 PAGE AVE.
ORLANDO FL 32806

7. Name and Address of New Registered Agent

Name Soledad Victoria Rangel

Street Address (P.O. Box Number is Not Acceptable)

PO Box 568 304

2121 S. Ferncreek Ave.

City

Orlando

FL

Zip Code

32806

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: Pat Demarco

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to:
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DP
NAME DEMARCO, PAT ☐ Delete
STREET ADDRESS 1505 PAGE AVE.
CITY-ST-ZIP ORLANDO FL 32806

TITLE VPT
NAME OSCARSON, GREG ☒ Delete
STREET ADDRESS 2320 SOUTH BROWN ST
CITY-ST-ZIP ORLANDO FL 32806

TITLE ST
NAME GAGNE, RUSSELL ☐ Delete
STREET ADDRESS 2420 SOUTH SHINE ST
CITY-ST-ZIP ORLANDO FL 32806

TITLE AST
NAME GAGNE, LOUISE ☐ Delete
STREET ADDRESS 2420 SOUTH SHINE ST
CITY-ST-ZIP ORLANDO FL 32806

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Vice President ☐ Change ☒ Addition
NAME Soledad Victoria Rangel
STREET ADDRESS 2121 South Ferncreek Ave
CITY-ST-ZIP Orlando, FL 32806

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME Oscarson, Greg
STREET ADDRESS 2320 South Brown St
CITY-ST-ZIP Orlando, FL 32806

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE: Pat Demarco

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-9-05