

2000 UNIFORM BUSINESS REPORT (UBR)

0017390

DOCUMENT # N99000002878

1. Entity Name

ORLANDO VICTORY UNITED CHURCH OF CHRIST, INC.

Principal Place of Business

Mailing Address

2200 SILVER STAR ROAD
ORLANDO FL 32804

2200 SILVER STAR ROAD
ORLANDO FL 32804-3308

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3596124

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOLT, LEONARD O
2704 CULLEN'S CRT.
OC0EE FL 34761

Name: Odiator Arugu
Street Address (P.O. Box Number is Not Acceptable):
1999 West Colonial Drive
Suite 213
City: Orlando FL Zip Code: 32804

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.

SIGNATURE

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☐ Delete
NAME	HOLT, LEONARD O	
STREET ADDRESS	2704 CULLEN'S CT.	
CITY-ST-ZIP	OC0EE FL 34761	
TITLE	V	☐ Delete
NAME	HOLT, CONSTANCE	
STREET ADDRESS	2704 CULLEN'S CT.	
CITY-ST-ZIP	OC0EE FL 34761	
TITLE	D	☐ Delete
NAME	BRYANT, JEANETTE	
STREET ADDRESS	YELLOW ROSE DR.	
CITY-ST-ZIP	ORLANDO FL 32818	
TITLE	D	☐ Delete
NAME	WHITE, BRENDA	
STREET ADDRESS	2737 FOXWOOD CT.	
CITY-ST-ZIP	ORLANDO FL 32818	
TITLE	D	☐ Delete
NAME	SLAUGHTER, DEBORAH	
STREET ADDRESS	4902 SILVER OAKS	
CITY-ST-ZIP	ORLANDO FL 32808	
TITLE	D	☐ Delete
NAME	ELLIOT, MARY	
STREET ADDRESS	4662 VARGAS STREET	
CITY-ST-ZIP	ORLANDO FL 32811	

TITLE	Treasurer	☐ Change ☒ Addition
NAME	Jacques Petite	
STREET ADDRESS	4156 Minoso Street	
CITY-ST-ZIP	Orlando, FL 32811	
TITLE	D	☐ Change ☒ Addition
NAME	Ned Howard	
STREET ADDRESS	2737 Foxwood Court	
CITY-ST-ZIP	Orlando, FL 32818	
TITLE	D	☐ Change ☒ Addition
NAME	Virginia Porter	
STREET ADDRESS	1932 Lake Atruim Circle, Apt. 81	
CITY-ST-ZIP	Orlando, FL 32839	
TITLE	D	☐ Change ☒ Addition
NAME	Andrew Mitchell	
STREET ADDRESS	1796 Firwood	
CITY-ST-ZIP	Orlando, FL 32818	
TITLE	S	☐ Change ☒ Addition
NAME	Joyce Robinson	
STREET ADDRESS	3166 N. Pine Hills Road	
CITY-ST-ZIP	Orlando, FL 32808	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Leonard O. Holt

407/295-1866

Date

Daytime Phone #

CR2E037 (9/99)

KE

FILED
00 OCT 31 AM 10:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA



REINSTATEMENT

DO NOT WRITE IN THIS SPACE