2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED DOCUMENT # N99000002878 Jan 31, 2007 08:00 AM 1. Entity Name **Secretary of State** ORLANDO VICTORY UNITED CHURCH OF CHRIST, INC. Principal Place of Business Mailing Address 1255 N. PINE HILLS RD ORLANDO FL 32808 1255 N. PINE HILLS RD ORLANDO FL 32808 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) Applied For City & State City & State 4. FEI Number 59-3596124 Not Applicable Zıp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOLT, LEONARD O Street Address (P.O. Box Number is Not Acceptable) 1255 N. PINE HILLS RD ORLANDO FL 32808 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. U00000614471 02/06/07-80032-005 61.25 SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Defete ☐ Addition ППГ Change NAME. HOLT, LEONARD O NAME STREET ADDRESS STREET ADDRESS 6501 VERNON ST CITY-ST-ZIP ORLANDO FL 32818 CITY-S1-ZIP HUE Delete 1000 ☐ Change Addition NAMI: HOLT, CONSTANCE NAME STREET ADDRESS STREET ADDRESS 6501 VERNON ST CITY-ST-ZIP CHY-SI-ZIP ORLANDO FL 32818 TITLE ☐ Delete TIDE Change ☐ Addition D NAME NAME PORTER, VIRGINIA STREET ADDRESS STREET ADDRESS 1932 LK. ATRIUM CIRCLE #81 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32839 TITLE Delete HILL ☐ Change Addition NAME PETITE, JACQUES STREET ADDRESS STREET ADDRESS 4156 MINOSO STREET CITY-ST-ZIP CHY - ST-7IP ORLANDO FL 32811 TITLE Delete TITLE Change Addition NAME SLAUGHTER, DEBORAH NAME STREET ADDRESS 6207 BOLLING DR STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ORLANDO FL 32808 TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME ELLIOT, MARY STREET ADDRESS STREET ADDRESS 4662 VARGAS STREET CiTY-S1-ZIP CHY-S1-ZIP ORLANDO FL 32811

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 eath; that I am an officer or director of the corporation or the receiver or trustoe 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: