

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 05, 2003 8:00 am
Secretary of State

08-05-2003 90074 014 ****61.25

DOCUMENT # N99000002878

1. Entity Name

ORLANDO VICTORY UNITED CHURCH OF CHRIST, INC.



Principal Place of Business

**2200 SILVER STAR ROAD
ORLANDO FL 32804**

Mailing Address

**2200 SILVER STAR ROAD
ORLANDO FL 32804**

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**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**ARUGU, ODIATOR
1999 WEST COLONIAL DRIVE
SUITE 213
ORLANDO FL 32804**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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
After September 10, 2003, min will be \$236.25**

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 **P** ☐ Delete
NAME **HOLT, LEONARD O**
STREET ADDRESS **2704 CULLEN'S CT.**
CITY-ST-ZIP **OC00EE FL 34701**

TITLE **V** ☐ Delete
NAME **HOLT, CONSTANCE**
STREET ADDRESS **2704 CULLEN'S CT.**
CITY-ST-ZIP **OC00EE FL 34701**

TITLE **D** ☐ Delete
NAME **PORTER, VIRGINIA**
STREET ADDRESS **1932 LK. ATRIUM CIRCLE #81**
CITY-ST-ZIP **ORLANDO FL 32839**

TITLE **T** ☐ Delete
NAME **PETITE, JACQUES**
STREET ADDRESS **4156 MINOSO STREET**
CITY-ST-ZIP **ORLANDO FL 32811**

TITLE **D** ☐ Delete
NAME **SLAUGHTER, DEBORAH**
STREET ADDRESS **4002 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**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Address** ☒ Change ☐ Addition
NAME
STREET ADDRESS **6501 Vernon St**
CITY-ST-ZIP **Orlando, Fla 32818**

TITLE **Address** ☒ Change ☐ Addition
NAME
STREET ADDRESS **6501 Vernon St.**
CITY-ST-ZIP **Orlando, Fla 32818**

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

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

TITLE **Address** ☒ Change ☐ Addition
NAME
STREET ADDRESS **6207 Bolling Dr.**
CITY-ST-ZIP **Orlando, Fla 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.

Ren: Leonard O. Holt, Pres.
SIGNATURE: [Signature]

August 3, 2003

(409)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)