I hereby 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 all other like empowered.

SIGNATURE: ANTHONY ORZO

Electronic Signature of Signing Officer/Director Detail

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1100008712

Entity Name: RESTORATION CHURCH PORT ORANGE INC.

Current Principal Place of Business:

1648 TAYLOR ROAD #202 PORT ORANGE, FL 32128

Current Mailing Address:

1648 TAYLOR ROAD #202 PORT ORANGE, FL 32128 US

FEI Number: 45-3192256

Name and Address of Current Registered Agent:

ORZO, ANTHONY 1307 SHADOW PATH DRIVE PORT ORANGE, FL 32128 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	Ρ	Title	OFFICER
Name	ORZO, ANTHONY	Name	KITCHIN, WILLIAM
Address	1307 SHADOW PATH DRIVE	Address	501 BOXWOOD LANE
City-State-Zip:	PORT ORANGE FL 32128	City-State-Zip:	NEW SMYRNA BEACH FL 32168

Date

PRESIDENT

04/25/2018

FILED Apr 25, 2018 Secretary of State CC7101522673

Certificate of Status Desired: No