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

DOCUMENT# N1100008712

Entity Name: RESTORATION CHURCH PORT ORANGE INC.

Current Principal Place of Business:

1307 SHADOW PATH DRIVE PORT ORANGE. FL 32128

Current Mailing Address:

1307 SHADOW PATH DRIVE PORT ORANGE. FL 32128

FEI Number: 45-3192256

Name and Address of Current Registered Agent:

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

FILED Apr 29, 2013 Secretary of State CC4521923221

Certificate of Status Desired: No

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			Date
Officer/Director Detail :				
Title	P	Title	0	
Name	ORZO, ANTHONY	Name	MANIQUIS, DAVID	
Address	1307 SHADOW PATH DRIVE	Address	1369 SUNNINGDALE LANE	
City-State-Zip:	PORT ORANGE FL 32128	City-State-Zip:	ORMOND BEACH FL 32174	
Title	0	Title	т	
Name	WILLIAMS, TOM	Name	ROBB, CHRISTINA	
Address	PO BOX 9061	Address	1003 CALLE GRANDE ST.	
City-State-Zip:	DAYTONA BEACH FL 32120	City-State-Zip:	ORMOND BEACH FL 32174	

04/29/2013

Date

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT