#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000001688

Entity Name: APOSTOLIC FAITH CHURCH MARANATHA OF ORLANDO INC

**FILED** Apr 23, 2019 **Secretary of State** 7214340201CC

### **Current Principal Place of Business:**

5040 EDGEWATER DR ORLANDO, FL 32810

## **Current Mailing Address:**

P.O. BOX 680664

ORLANDO, FL 32868 US

FEI Number: 46-2032888 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

CHARLESTON, A. DAVID 7642 REX HILLS TRAIL ORLANDO, FL 32818 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.

Title

Title

TRUSTEE, DEACON

SIGNATURE:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title CEO

CHARLESTON, A. DAVID Name CHARLESTON, A. DAVID Name 7642 REX HILLS TRAIL Address Address 7642 REX HILLS TRAIL City-State-Zip: ORLANDO FL 32818 ORLANDO FL 32818 City-State-Zip:

**TRUSTEE** Title Title VP, /EXECUTIE SECRETARY

Name ELIE, JEAN STEVE CHARLESTON, MARIE J MRS Name Address 587 WEKIVA CREST DR Address 7642 REX HILLS TRAIL APOPKA FL 32712 City-State-Zip: City-State-Zip: ORLANDO FL 32818

Title **TREASURER** Name DORÉLUS, JOSE MR. DORELUS, RAYMONDE A. Name

**EVANGELISTE** Address 102 SANDERS STREET 102 E. 19TH STREET Address

City-State-Zip: APOPKA FL 32703 City-State-Zip: APOPKA FL 32703

Title TRUSTEE

PETIT-FRÈRE, JEAN MOÏSE DEACON Name

6490 METRO WEST BLVD Address

APT.828

ORLANDO FL 32835 City-State-Zip:

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.

04/23/2019 SIGNATURE: CHARLESTON A. DAVID PASTOR/CEO

Electronic Signature of Signing Officer/Director Detail

Date