## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 716765** 

Entity Name: THE ORLANDO - UNION RESCUE MISSION

**Current Principal Place of Business:** 

1521 W WASHINGTON ST ORLANDO. FL 32805

**Current Mailing Address:** 

P.O. BOX 2791

ORLANDO, FL 32802 US

FEI Number: 59-1035082 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLAYTON, FRED B. 1521 W. WASHINGTON ST. ORLANDO, FL 32805 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: FRED B. CLAYTON 02/01/2021

Electronic Signature of Registered Agent

Date

FILED Feb 01, 2021

**Secretary of State** 

4450495851CC

Officer/Director Detail:

Title CHAIRMAN/DIRECTOR Title DIRECTOR

NameOLSON, MARY SNameSMITH, MICHAEL WAddress415 PEACHTREE RDAddress604 BLUE LAKE DR.City-State-Zip:ORLANDO FL 32804City-State-Zip:LONGWOOD FL 32779

TitleTREASURER/DIRECTORTitleDIRECTORNameDETWEILER, MAYLINDANamePHILLIPS, J DONAddress529 VERSAILLES DRAddress1475 KELSO BLVD.

City-State-Zip: MAITLAND FL 32751 City-State-Zip: WINDERMERE FL 32835

TitleSECRETARY/DIRECTORTitlePRESIDENT/CEONameINGS, PEARLNameCLAYTON, FRED B.

Address 505 VERN DRIVE Address 719 N. RIO GRANDE AVE.

City-State-Zip: ORLANDO FL 32805 City-State-Zip: ORLANDO FL 32804

Title DIRECTOR Title DIRECTOR

NameMOORE, RESHONNameMOORE, STEWARTAddress830 MCFALL AVE.Address174 SUN PALM LANE

City-State-Zip: ORLANDO FL 32805 City-State-Zip: ALTAMONTE SPRINGS FL 32701

Continues on page 2

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: FRED CLAYTON PRESIDENT 02/01/2021

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR
Name ROLL, BILL

Address 1194 N. PARK AVE.

City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR

Name HEADLEY, THOMAS Address 423 N. MAIN ST.

City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR

Name BAILES, CHARLES
Address 1680 WALNUT AVE.

City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR

Name RUTSYAMUKA, LINDA

Address 10646 CHERRY OAK CIRCLE

City-State-Zip: ORLANDO FL 32817

Title DIRECTOR

Name SUPERTINO, CHERI Address 161 S. PHELPS AVE.

City-State-Zip: WINTER PARK FL 32789