

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

DOCUMENT# 769697

**Entity Name:** ORANGE COUNTY JAIL MINISTRY, INC.**Current Principal Place of Business:**3741 VISION BLVD  
ORLANDO, FL 32809**Current Mailing Address:**P.O. BOX 568521  
ORLANDO, FL 32856-8521 US**FEI Number:** 59-2406715**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STONE, MARK  
4205 EDGEWATER DR.  
ORLANDO, FL 32804 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:** MARK STONE

03/12/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name BROWDER, ANNE S  
Address 6370 LIDO COURT  
City-State-Zip: ORLANDO FL 32807

Title DIRECTOR  
Name ST. JOHN, FRANK  
Address 231 FLAME AVE.  
City-State-Zip: MAITLAND FL 32751

Title CHAIRMAN  
Name JOSEPH, GEORGE P  
Address 5055 DOWN POINT LANE  
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR  
Name COLEMAN, CHRIS  
Address 859 BALLARD ST.  
APT. C  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title ADVISORY BOARD  
Name MCGAHEY, JOSEPH  
Address 2666 CANTER CLUB TRAIL  
City-State-Zip: APOPKA FL 32712

Title TREASURER  
Name STONE, MARK  
Address 4205 EDGEWATER DR.  
City-State-Zip: ORLANDO FL 32804

Title VC  
Name WROTEN, LEN  
Address 3520 STERLING LANE  
City-State-Zip: ORLANDO FL 32817

Title ADVISORY BOARD  
Name ROOKS, MARVIN  
Address 2130 CHINOOK TR.  
City-State-Zip: MAITLAND FL 32751

**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:** GEORGE P. JOSEPH JR.

CHAIRMAN

03/12/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	SENIOR CHAPLAIN
Name	BROWN, WILLIAM T
Address	1349 KINTLA RD.
City-State-Zip:	APOPKA FL 32712