

2024 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:**MUNN, BOB
2435 TURNBERRY DRIVE.
OVIEDO, FL 32765 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: BOB MUNN****01/16/2024**

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

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

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

Title DIRECTOR
Name ALI, HAFEEZ
Address 1116 HUNTER AVE
City-State-Zip: ORLANDO FL 32804

Title SENIOR CHAPLAIN
Name GONZALEZ, LEONARDO
Address 4026 TALL TREE DRIVE
City-State-Zip: ORLANDO FL 32810

Title TREASURER
Name MUNN, BOB
Address 2435 TURNBERRY DRIVE
City-State-Zip: OVIEDO FL 32765

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: BOB MUNN**TREASURER****01/16/2024**

Electronic Signature of Signing Officer/Director Detail

Date