

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011930

FILED
May 04, 2021
Secretary of State
7803927442CC

Entity Name: FINDING THE LOST SHEEP INC.

Current Principal Place of Business:

122 WEST MCKEY ST.
OCOEE, FL 34761

Current Mailing Address:

P.O.BOX 770591
WINTER GARDEN, FL 34777 US

FEI Number: 84-1665528

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HODGE, ANTHONY L.
122 WEST MCKEY ST.
OCOEE, FL 34761 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name KELLY, KENNY
Address 4948 LAKE PICKETT DR
City-State-Zip: GROVELAND FL 34736

Title SECRETARY
Name SMITH, LORRAINE V
Address 6019 POWDER POST DR
City-State-Zip: ORLANDO FL 32810

Title DIRECTOR
Name TAYLOR, JOSH
Address 12423 MARSHALL FARMS RD
City-State-Zip: WINTER GARDEN FL 34787

Title CEO, PRESIDENT, PASTOR
Name HODGE, ANTHONY
Address 122 WEST MCKEY ST.
City-State-Zip: OCOEE FL 34761

Title VP, EXECUTIVE DIRECTOR
Name VILLARD-HODGE, SHAREE
Address 122 WEST MCKEY ST.
City-State-Zip: OCOEE FL 34761

Title TREASURER
Name BOARDMAN, REED
Address 1011 TERRACE BLVD
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name RATLIFF, JULIE
Address 17606 SATSUMA CIRCLE
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR
Name FLECK, PETER
Address 10820 WONDER LANE
City-State-Zip: WINDERMERE FL 34786

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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: SHAREE VILLARD-HODGE

EXECUTIVE DIRECTOR

05/04/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name RICHARDSON , LUCY
Address 303 SW CROWN POINT RD
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR
Name WEATHERS, DENISE
Address P.O. BOX 770591
City-State-Zip: WINTER GARDEN FL 34777

Title DIRECTOR
Name FREEMAN, WAYNE
Address P.O. BOX 770591
City-State-Zip: WINTER GARDEN FL 34777