

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011930

Entity Name: FINDING THE LOST SHEEP INC.**Current Principal Place of Business:**122 WEST MCKEY ST.
OCOE, 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.
OCOE, 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	DIRECTOR
Name	TAYLOR, JOSH
Address	12423 MARSHALL FARMS RD
City-State-Zip:	WINTER GARDEN FL 34787
Title	VP, EXECUTIVE DIRECTOR
Name	VILLARD-HODGE, SHAREE
Address	122 WEST MCKEY ST.
City-State-Zip:	OCOE FL 34761
Title	DIRECTOR
Name	RATLIFF, JULIE
Address	17606 SATSUMA CIRCLE
City-State-Zip:	WINTER GARDEN FL 34787

Title	SECRETARY
Name	SMITH, LORRAINE V
Address	6019 POWDER POST DR
City-State-Zip:	ORLANDO FL 32810
Title	CEO, PRESIDENT, PASTOR
Name	HODGE, ANTHONY
Address	122 WEST MCKEY ST.
City-State-Zip:	OCOE FL 34761
Title	TREASURER
Name	BOARDMAN, REED
Address	1011 TERRACE BLVD
City-State-Zip:	ORLANDO FL 32803
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-HODGEVP, EXECUTIVE
DIRECTOR

09/24/2020

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