

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

DOCUMENT# N06000002722

**Entity Name:** RESTORATION WORLD OUTREACH MINISTRIES, INC**Current Principal Place of Business:**6995 NW 82ND AVENUE  
MIAMI, FL 33166**Current Mailing Address:**4846 N UNIVERSITY DRIVE, PMB 375  
LAUDERHILL, FL 33351**FEI Number:** 20-4488530**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LYSTON, STEVE  
5000 OAKES ROAD  
SUITE I  
DAVIE, FL 33314 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:** STEVE LYSTON

02/25/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LYSTON, STEVE  
Address 5000 OAKES ROAD  
SUITE I  
City-State-Zip: DAVIE FL 33314

Title T  
Name LYSTON, MICHELLE  
Address 5000 OAKES ROAD  
SUITE I  
City-State-Zip: DAVIE FL 33314

Title D  
Name BARHOO, TONY SDR.  
Address 1355 CADILLAC DRIVE  
City-State-Zip: DAYTONA BEACH FL 32117

Title DIRECTOR  
Name GREEN, NATALIE  
Address 5000 OAKES ROAD  
SUITE \*I  
City-State-Zip: DAVIE FL 33314

Title D  
Name HUTCHINSON, DORIS  
Address 9413 NW 42ND STREET  
City-State-Zip: SUNRISE FL 33351

Title S  
Name GRANT-HAMILTON, CAROLYN  
Address 9413 NW 42ND STREET  
City-State-Zip: SUNRISE FL 33351

Title D  
Name BROTHERTON, NADRA  
Address 5000 OAKES ROAD  
SUITE \*I  
City-State-Zip: DAVIE FL 33314

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:** NADRA S BROTHERTON

DIRECTOR

02/25/2021

Electronic Signature of Signing Officer/Director Detail

Date