

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000000145

**Entity Name:** VOICE OF HEALING OUTREACH INCORPORATED

**Current Principal Place of Business:**

10 N HIAWASSEE RD  
ORLANDO, FL 32835

**Current Mailing Address:**

P.O. BOX 2005  
ORLANDO, FL 32802 US

**FEI Number: 26-3984459**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

VERA, RICH  
1829 BLAINE TERRACE  
WINTER PARK, FL 32792 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            PRESIDENT  
Name            VERA, RICH  
Address        1829 BLAINE TERRACE  
City-State-Zip: WINTER PARK FL 32792

Title            OFFICER  
Name            DYZCOK, MARK  
Address        914 HIRE CIRCLE  
City-State-Zip: OCOEE FL 34761

Title            D  
Name            VERA, LESLIE A  
Address        1829 BLAINE TERRACE  
City-State-Zip: WINTER PARK FL 32792

Title            OFFICER  
Name            EDWARDS, BRANDON  
Address        1241 SHERBROOK DRIVE  
City-State-Zip: DELTONA FL 32725

Title            DIRECTOR  
Name            CARMONA, EDWARD  
Address        6127 SUNSET ISLE DR  
City-State-Zip: WINTER GARDEN FL 34787

*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: RICH VERA**

**PRESIDENT**

**04/04/2024**

Electronic Signature of Signing Officer/Director Detail

Date