

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000000638

**Entity Name:** REACH ONE A DAY 4 CHRIST OUTREACH INT'L MINISTRIES  
INC**FILED**  
**Apr 19, 2017**  
**Secretary of State**  
**CC4415171202****Current Principal Place of Business:**1802 RAVEN GLEN DRIVE  
RUSKIN, FL 33570**Current Mailing Address:**1802 RAVEN GLEN DRIVE  
RUSKIN, FL 33570 US**FEI Number: APPLIED FOR****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**STAND APART PARADIGM INC  
525 VISTA WAY LANE  
EAGLE LAKE, FL 33839 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	CEO
Name	TRICE, ODESSA W.
Address	1802 RAVEN GLEN DRIVE
City-State-Zip:	RUSKIN FL 33570

Title	VP
Name	WYATT, JADE
Address	248 MERCHANTS DRIVE
City-State-Zip:	COLUMBIA SC 29212

Title	PRESIDENT
Name	ROLLINS, JUANITA
Address	525 VISTA WAY LANE
City-State-Zip:	EAGLE LAKE FL 33839

Title	CFO
Name	MACKEY, LILLIAN
Address	650 S.E CHAPMAN AVE
City-State-Zip:	PORT ST LUCIE FL 34984

Title	BM
Name	WAY, ELISEO III
Address	448 JORDAN STUART CIRCLE APT.218
City-State-Zip:	APOPKA FL 32703

Title	BM
Name	ROLLINS, DAVID LEROY
Address	817 RAVENS CIRCLE APT 103
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	BM
Name	TRICE, RAYMOND DEXTER SR.
Address	1802 RAVEN GLEN DRIVE
City-State-Zip:	RUSKIN FL 33570

*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: ODESSA W. TRICE****CEO****04/19/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date