

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19405

Entity Name: RESCUE OUTREACH MISSION OF CENTRAL FLORIDA, INC.**Current Principal Place of Business:**1701 HISTORIC GOLDSBORO BLVD.
SANFORD, FL 32771**Current Mailing Address:**1701 HISTORIC GOLDSBORO BLVD
SANFORD, FL 32771 US**FEI Number:** 59-2876415**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOWARD, JULIA
1701 HISTORIC GOLDSBORO BLVD.
SANFORD, FL 32771 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:** JULIA HOWARD

01/21/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name HOWARD, JULIA F
Address 1701 HISTORIC GOLDSBORO BLVD
City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name FAISON, QUINTON
Address 3272 NIGHT BREEZE COURT
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR
Name FEACHER-JONES, JEAN MARIE
Address 1701 HISTORIC GOLDSBORO BLVD
City-State-Zip: SANFORD FL 32771

Title TREASURER
Name PERRY, JACQUELYN V
Address 1701 HISTORIC GOLDSBORO BLVD.
City-State-Zip: SANFORD FL 32771

Title SECRETARY
Name PHILPOT, MELVIN
Address 1701 HISTORIC GOLDSBORO BLVD
City-State-Zip: SANFORD FL 32771

Title VC
Name PAVLAKOS, MANDY
Address 1701 HISTORIC GOLDSBORO BLVD
City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name STALLWORTH, SHARON
Address 1701 HISTORIC GOLDSBORO BLVD
City-State-Zip: SANFORD FL 32771

Title INTERIM EXECUTIVE DIRECTOR
Name DEESE, BONNYE
Address 1701 HISTORIC GOLDSBORO BLVD.
City-State-Zip: SANFORD FL 32771

Continues on page 2

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: BONNYE DEESE

SHELTER MANAGER

01/21/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LOCKHART, AMY
Address 1101 E. 1ST STREET
City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name TARATINO, LOUIS
Address 1701 HISTORIC GOLDSBORO BLVD
City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name SPRIGGS, LISA
Address 100 ESLINGER WAY
City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name TURNAGE, BOB
Address 1701 HISTORIC GOLDSBORO BLVD
City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name ELLWOOD, AMY
Address 400 E LAKE MARY BLVD
City-State-Zip: SANFORD FL 32773