

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000006866

**Entity Name:** SHOWTYME OUTREACH, INC.

**Current Principal Place of Business:**

4321 SOLOMON DRIVE  
ORLANDO, FL 32811

**Current Mailing Address:**

4321 SOLOMON DRIVE  
ORLANDO, FL 32811

**FEI Number:** 87-2171801

**Certificate of Status Desired:** No

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

GILREATH, ALICIA  
4321 SOLOMON DRIVE  
ORLANDO, FL 32811 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 D  
Name GILREATH, ALICIA  
Address 4321 SOLOMON DRIVE  
City-State-Zip: ORLANDO FL 32811

Title D  
Name BURNS, BAKARI F  
Address 2920 CLEAR WAY  
City-State-Zip: ORLANDO FL 32805

Title D  
Name HENRY, JASON  
Address 612 CANNON RIDGE DRIVE, UNIT 2515  
City-State-Zip: ORLANDO FL 32818

Title D  
Name PARAMORE, SHERRY  
Address 1644 WHITNEY ISLES DRIVE  
City-State-Zip: WINDERMERE FL 34786

Title D  
Name JOSE MAUEL VARELA  
Address 150 BEAR SPRINGS DRIVE, #310  
City-State-Zip: WINTER SPRINGS FL 32708

*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:** ALICIA GILREATH

**OWNER**

**04/25/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date