

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012349

FILED
Apr 29, 2008
Secretary of State

Entity Name: ORLANDO WORLD OUTREACH CENTER, INC.

Current Principal Place of Business:

1600 WHISPERING HILLS DRIVE
FRANKLIN, TN 37069

New Principal Place of Business:

6418 CARTMEL LANE
WINDERMERE, FL 34786

Current Mailing Address:

P.O. BOX
1829
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 20-5973681 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOHNSON, TIMOTHY
Address: 1600 WHISPERING HILLS DRIVE
City-St-Zip: FRANKLIN, TN 37069

Title: D () Delete
Name: JOHNSON, CYNETHIA
Address: 1600 WHISPERING HILLS DRIVE
City-St-Zip: FRANKLIN, TN 37069

Title: D () Delete
Name: FULLER, BRETT
Address: 43479 SAVOY WOODS COURT
City-St-Zip: CHANTILLY, VA 20152

Title: D () Delete
Name: EDMONSON, BRAD
Address: 605 WILDFLOWER COURT
City-St-Zip: FRANKLIN, TN 37064

Title: D () Delete
Name: LAFFOON, JIM
Address: 249 GILLETTE DRIVE
City-St-Zip: FRANKLIN, TN 37069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JOHNSON, TIMOTHY
Address: 6418 CARTMEL LANE
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Change () Addition
Name: JOHNSON, CYNETHIA
Address: 6418 CARTMEL LANE
City-St-Zip: WINDERMERE, FL 34786

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MITCHELL S. MARTIN

○

04/29/2008

Electronic Signature of Signing Officer or Director

_____ Date