

NO6000012349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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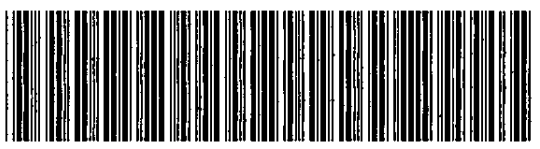
(Business Entity Name)

(Document Number)

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R.A. Change

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Orlando World Outreach Center, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N06000012349

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jean P. Shearer

(Name of Contact Person)

Miller & Martin PLLC

(Firm/Company)

150 4th Avenue North, Suite 1200

(Address)

Nashville, TN 37219-2433

(City/State and Zip Code)

For further information concerning this matter, please call:

Jean P. Shearer

(Name of Contact Person)

at ( 615 ) 744-8550

(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

