

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003146

FILED  
Jan 25, 2012  
Secretary of State

**Entity Name:** FAITHWORLD CENTER OF ORLANDO, INC.

**Current Principal Place of Business:**

7601 FOREST CITY ROAD  
ORLANDO, FL 32810 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 607608  
ORLANDO, FL 328607608 US

**New Mailing Address:**

**FEI Number:** 59-3200762

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HIRES, ERIC V ESQ  
2739 TAYLOR AVENUE  
ORLANDO, FL 32806 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:** PD  
**Name:** BROWN, CLINT S  
**Address:** P.O. BOX 607608  
**City-St-Zip:** ORLANDO, FL 32860

**Title:** D  
**Name:** BROWN, RANDY  
**Address:** 378 RACCOON STREET  
**City-St-Zip:** LAKE MARY, FL 32746

**Title:** DS  
**Name:** HAYES, DOUGLAS  
**Address:** 4754 ATWOOD DR.  
**City-St-Zip:** ORLANDO, FL 32828

**Title:** T  
**Name:** POOLE, JEFFREY  
**Address:** 202 RIVER OAK CT  
**City-St-Zip:** KATHLEEN, GA 31047

**Title:** V  
**Name:** SHACKELFORD, DOUGLAS  
**Address:** 11209 VERANDA CT  
**City-St-Zip:** BRADENTON, FL 34209

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:** CLINT S. BROWN

PD

01/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date