

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 SEP 11 PM 4:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000000272 (3)

1. Corporation Name

UNIFICATION OUTREACH MINISTRIES INTERNATIONAL IN
C.

Principal Place of Business

Mailing Address

1873 TIGERWOOD COURT
ORLANDO FL 32818

1873 TIGERWOOD COURT
ORLANDO FL 32818

3. Date Incorporated or Qualified
01/17/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NEWTON, PATREZA D
1873 TIGERWOOD COURT
ORLANDO FL 32818

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
NEWTON, PATREZA D
1873 TIGERWOOD COURT
ORLANDO FL 32818

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
FRANKLIN, YOLANDA
344 W. 17TH STREET
APOPKA FL 32703

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
BAILEY, SONYA
750 S. ORANGE BLOSSOM TR.
ORLANDO FL 32805

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DELETED

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DELETED

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DELETED

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

President, Debra Ann...
Board of Directors
1873 Tigerwood Ct
Orlando, FL 32818

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

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3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

Nancy L. Reeves (D)
Board Director Member
1873 Tigerwood Ct
Orlando, FL 32818

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

Board member
Miller Dean Anderson (D)
750 S. Orange Blossom Tr.
Orlando, FL 32805

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

ELISA F. Anderson (D)
Board member
1873 Tigerwood Ct
Orlando, FL 32818

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

(D)
ELISA F. Anderson
1873 Tigerwood Ct
Orlando, FL 32818

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0004516

CR2E037 (3/96)