

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000008875

**Entity Name:** SEVENTHDAY CHURCH OF GOD OUTREACH MINISTRIES INTERNATIONAL, INC.

**FILED**  
**Mar 07, 2024**  
**Secretary of State**  
**8748697105CC**

**Current Principal Place of Business:**

407 2ND STREET  
CLERMONT, FL 34711

**Current Mailing Address:**

407 2ND STREET  
CLERMONT, FL 34711 US

**FEI Number: 30-0294823**

**Certificate of Status Desired: No**

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

SEWELL, SELVYN M  
407 2ND STREET  
CLERMONT, FL 34711 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	PRES	Title	DIR
Name	SEWELL, SELVYN M	Name	WATSON, HORTENSE M
Address	407 2 ND STREET	Address	745 BRYSON LOOP
City-State-Zip:	CLERMONT FL 34711	City-State-Zip:	LAKELAND FL 33809
Title	EXECUTIVE SECRETARY	Title	DIRECTOR
Name	HAYLES, PAULETTE D	Name	LINDO, CLIVE M
Address	394 W. DELAVAN AVENUE,	Address	423 BURLAND STREET
City-State-Zip:	BUFFALO, NY 14213	City-State-Zip:	PUNTA GORDA FL 33950
Title	DIRECTOR		
Name	BELNAVIS-SEWELL, JOAN R		
Address	407 2 ND STREET		
City-State-Zip:	CLERMONT FL 34711		

*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: SELVYN SEWELL**

**PRESIDENT**

**03/07/2024**

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

\_\_\_\_\_  
Date