

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000004281

**FILED**  
**Apr 26, 2018**  
**Secretary of State**  
**CC0726696083**

**Entity Name:** WORLDWIDE CHARITY CENTER INC.

**Current Principal Place of Business:**

500 AUSTRALIAN AVENUE  
SUITE 640  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

500 AUSTRALIAN AVENUE  
SUITE 640  
WEST PALM BEACH, FL 33401 US

**FEI Number:** 34-2031471

**Certificate of Status Desired:** No

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

GLOVER, ROY  
500 AUSTRALIAN AVENUE  
SUITE 640  
WEST PALM BEACH, FL 33401 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 P  
Name GLOVER, ROY DSR.  
Address 9153 DUPONT PLACE  
City-State-Zip: WELLINGTON FL 33414

Title SEC  
Name CHEELEY, IOLA  
Address 2619 N.W. 10TH STREET  
City-State-Zip: POMPANO BEACH FL 33069

Title TREA  
Name HERBERT, GWEN  
Address 301 W. 22ND STREET  
City-State-Zip: RIVIERA BEACH FL 33404

Title VP  
Name GLOVER, TRACY R  
Address 6711 JACKSON LANE  
City-State-Zip: MILTON FL 32570

Title ADM  
Name GIROUX, CHRIS  
Address NEW LAKE DRIVE  
City-State-Zip: BOYNTON BEACH FL 33426

*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:** ROY GLOVER SR.

**PRESIDENT/CEO**

**04/26/2018**

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

\_\_\_\_\_  
Date