

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000012349

**Entity Name:** ORLANDO WORLD OUTREACH CENTER, INC.**Current Principal Place of Business:**4365 KENNEDY AVE  
ORLANDO, FL 32812**Current Mailing Address:**P.O. BOX 1829  
ORLANDO, FL 32802**FEI Number: 20-5973681****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JOHNSON, TIMOTHY  
4365 KENNEDY AVE  
ORLANDO, FL 32812 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:** TIMOTHY JOHNSON

01/30/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                  |
|-----------------|------------------|
| Title           | D                |
| Name            | JOHNSON, TIMOTHY |
| Address         | 3921 ISLE VISTA  |
| City-State-Zip: | ORLANDO FL 32812 |

|                 |                   |
|-----------------|-------------------|
| Title           | D                 |
| Name            | JOHNSON, CYNETHIA |
| Address         | 3921 ISLE VISTA   |
| City-State-Zip: | ORLANDO FL 32812  |

|                 |                         |
|-----------------|-------------------------|
| Title           | D                       |
| Name            | FULLER, BRETT           |
| Address         | 43479 SAVOY WOODS COURT |
| City-State-Zip: | CHANTILLY VA 20152      |

|                 |                    |
|-----------------|--------------------|
| Title           | D                  |
| Name            | LAFFOON, JIM       |
| Address         | 249 GILLETTE DRIVE |
| City-State-Zip: | FRANKLIN TN 37069  |

|                 |                          |
|-----------------|--------------------------|
| Title           | D                        |
| Name            | GREEN, DARRYL            |
| Address         | 20998<br>ROSTORMEL COURT |
| City-State-Zip: | ASHBURN VA 20147         |

|                 |                    |
|-----------------|--------------------|
| Title           | OFFICER            |
| Name            | BALL, SYDNEY       |
| Address         | 6913 SHELLY TRAIL  |
| City-State-Zip: | NASHVILLE TN 37211 |

*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:** TIMOTHY JOHNSON

PASTOR

01/30/2021

Electronic Signature of Signing Officer/Director Detail

Date