

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000001091

**Entity Name:** LIBERTY OUTREACH INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business:**

581 N PARK AVE  
APOPKA, FL 32712

**Current Mailing Address:**

PO BOX 297  
APOPKA, FL 32704

**FEI Number: 36-4720432**

**Certificate of Status Desired: No**

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

BRANTON, ANGELA Y  
581 N PARK AVE  
297  
APOPKA, FL 32712 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 PASTOR  
Name BRANTON, ANGELA Y  
Address PO BOX 297  
City-State-Zip: APOPKA FL 32704

Title PASTOR  
Name BRANTON, ISRAEL III  
Address PO BOX 297  
City-State-Zip: APOPKA FL 32704

Title OFFICER  
Name VANN, DONNA  
Address 1123 ANDREW AVILES CIR  
City-State-Zip: TAMPA FL 33619

Title OFFICER  
Name OLIVER, MICHELLE  
Address 1703 MERCY DR  
APT. 201  
City-State-Zip: ORLANDO FL 32808

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: ANGELA Y. BRANTON**

**SENIOR  
PASTOR/DIRECTOR**

**04/09/2025**

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

\_\_\_\_\_  
Date