## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N12000010594

#### Entity Name: REDEEMING LIFE OUTREACH MINISTRIES, INC.

#### **Current Principal Place of Business:**

2516 S. OAK AVENUE SANFORD, FL 32773

#### **Current Mailing Address:**

P. O. BOX 1496 SANFORD, FL 32772-1496

## FEI Number: 46-1469685

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

LOWMAN, WILLIAM RJR.ESQ. SHUFFIELD, LOWMAN & WILSON, P.A. 1000 LEGION PLACE, SUITE 1700 ORLANDO, FL 32801 US Certificate of Status Desired: Yes

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

## **Officer/Director Detail :**

Title	OFFICER, PRESIDENT, CHAIRMAN	Title	OFFICER, SECRETARY, TREASURER	
Name	DEWITT, EDWARD J	Name	DEWITT, KATHERINE E	
Address	933 MILSHORE DRIVE	Address	911 MILSHORE DRIVE	
City-State-Zip:	CHULUOTA FL 32766	City-State-Zip:	CHULUOTA FL 32766	
Title	OFFICER, DIRECTOR	Title	DIRECTOR	
Name	BROOKS, JOE W	Name	BUIE, CARSANDRA	
Address	200 BRYNWOOD LANE	Address	104 ELLEN PLACE	
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	SANFORD FL 32771	
Title	DIRECTOR	Title		
Name	MASON, LORA K	Name	WROBLESKI, LEAH	
Address	1736 LAKE GEORGIA DRIVE	Address	P.O. BOX 621268	
City-State-Zip:	ORLANDO FL 32816	City-State-Zip:	OVIEDO FL 32762	
Title	DIRECTOR	Title	EXECUTIVE DIRECTOR	
Name	DOUDNEY, DOUGLAS	Name	DEWITT, SHERYL W	
Address	2878 SOUTH OSCEOLA AVENUE	Address	933 MILLSHORE DRIVE	
City-State-Zip:	ORLANDO FL 32896	City-State-Zip:	CHULUOTA FL 32766	

## Continues on page 2

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: SHERYL DEWITT

EXECUTIVE DIRECTOR 04/

04/07/2020

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 07, 2020 Secretary of State 0953146456CC

Date

# **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	TRICKEY, KELLY
Address	1259 SECOND AVENUE
City-State-Zip:	CHULUOTA FL 32766