

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000001854

Entity Name: RENEWED LIFE OUTREACH CENTER, INC.**Current Principal Place of Business:**13752 W US 90
GREENVILLE, FL 32331**Current Mailing Address:**P.O. BOX 56
GREENVILLE, FL 32344 US**FEI Number:** 46-0898152**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PETERSON, BRIAN CHRISTOPHER
87 MEADOW DRIVE
MONTICELLO, FL 32344 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:** BRIAN CHRISTOPHER PETERSON

07/24/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | | | |
|-----------------|-----------------------------|-----------------|----------------------------|
| Title | PASTOR, PRESIDENT | Title | CO-SECRETARY, CO-TREASURER |
| Name | PETERSON, BRIAN CHRISTOPHER | Name | FUTCH, KIM |
| Address | 87 MEADOW DR | Address | 3461 DEERFIELD LANE |
| City-State-Zip: | MONICELLO FL 32344 | City-State-Zip: | VALDOSTA GA 31606 |
| Title | CO-SECRETARY, CO-TREASURER | Title | BOARD MEMBER |
| Name | PETERSON, JERRI | Name | RENFROE, GREG |
| Address | 87 MEADOW DRIVE | Address | 3218 N SR 53 |
| City-State-Zip: | MONTICELLO FL 32344 | City-State-Zip: | MADISON FL 32340 |

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: JERRI PETERSONCO-SECRETARY, CO-
TREASURER

07/24/2023

Electronic Signature of Signing Officer/Director Detail

Date