

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000004586

**Entity Name:** FAITH TEMPLE COMMUNITY OUTREACH MINISTRIES,INC.

**Current Principal Place of Business:**

11223 NORTH WILLIAMS STREET  
SUITE J  
DUNNELLON, FL 34432

**Current Mailing Address:**

PO BOX 914  
DUNNELLON, FL 34430 US

**FEI Number:** 46-5663339

**Certificate of Status Desired:** No

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

OATS, FREDDIE P. III  
11223 NORTH WILLIAMS STREET  
SUITE J  
DUNNELLON, FL 34432 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:** FREDDIE P. OATS,III

05/10/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DPVST  
Name           OATS, FREDDIE P. III  
Address        PO BOX 914  
City-State-Zip: DUNNELLON FL 34430  
  
Title           DT  
Name           MATHIS, JACQUELING L.  
Address        16450 NORTHEAST 60TH STREET  
City-State-Zip: WILLISTON FL 32696

Title           DVP  
Name           OATS, DEBORA D.  
Address        PO BOX 914  
City-State-Zip: DUNNELLON FL 34430  
  
Title           DS  
Name           POWELL, VARICE L.  
Address        9245 N. AGATHA DR.  
City-State-Zip: CITRUS SPRINGS FL 34434

*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:** FREDDIE P. OATS III

**PRESIDENT**

05/10/2023

Electronic Signature of Signing Officer/Director Detail

Date