

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

DOCUMENT# N20000007318

**Entity Name:** FELLOWSHIP HOUSE CHURCH NETWORK OF CENTRAL FLORIDA, INC.

**FILED**  
**Apr 11, 2021**  
**Secretary of State**  
**5123384473CC**

**Current Principal Place of Business:**

180 MAGNOLIA WOODS CT APT 4C  
DELTONA, FL 32725

**Current Mailing Address:**

180 MAGNOLIA WOODS CT APT 4C  
DELTONA, FL 32725 US

**FEI Number: 85-1843820**

**Certificate of Status Desired: No**

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

WAISANEN, PHILIP  
180 MAGNOLIA WOODS CT APT 4C  
DELTONA, FL 32725 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 P  
Name WAISANEN, PHILIP C  
Address 180 MAGNOLIA WOODS CT APT 4C  
City-State-Zip: DELTONA FL 32725

Title VP  
Name BOWSER, RONALD  
Address 1441 AMBASSADOR AVE  
City-State-Zip: DELTONA FL 32725

Title T  
Name WAISANEN, ANA B  
Address 180 MAGNOLIA WOODS CT APT 4C  
City-State-Zip: DELTONA FL 32725

Title S  
Name MCCORMICK, ROXANNE  
Address 1441 AMBASSADOR AVE  
City-State-Zip: DELTONA FL 32725

*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: PHILIP C WAISANEN**

**PRESIDENT**

**04/11/2021**

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

\_\_\_\_\_  
Date