

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002582

Entity Name: WATOTO CHILD CARE MINISTRY, INC.**Current Principal Place of Business:**258 CRYSTAL GROVE BLVD
LUTZ, FL 33548**Current Mailing Address:**P.O. BOX 1320
LUTZ, FL 33548 US**FEI Number:** 59-3445250**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**STUTZMAN, EUGENE US DIR
258 CRYSTAL GROVE BLVD
LUTZ, FL 33548 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	CHAIRMAN
Name	SKINNER, GARY M
Address	258 CRYSTAL GROVE BLVD
City-State-Zip:	LUTZ FL 33548

Title	SECRETARY
Name	YOUNG, SCOTT
Address	4882 WILDE POINT DR
City-State-Zip:	SARASOTA FL 34233

Title	BOARD MEMBER
Name	WENDLAND, BEN
Address	11171 RIVER RD
City-State-Zip:	RICHMOND V6X 1-26

Title	BOARD MEMBER
Name	WAGNER, PHILIP
Address	19220 STARE STREET
City-State-Zip:	NORTHRIDGE CA 91324

Title	BOARD MEMBER
Name	KOKE, ROB
Address	258 CRYSTAL GROVE BLVD
City-State-Zip:	LUTZ FL 33548

Title	CEO
Name	STUTZMAN, EUGENE
Address	258 CRYSTAL GROVE BLVD
City-State-Zip:	LUTZ FL 33548

Title	CFO
Name	KING, VALERIE S
Address	258 CRYSTAL GROVE BLVD
City-State-Zip:	LUTZ FL 33548

Title	BOARD MEMBER
Name	CORY, WALL
Address	10549 SAN TRAVASO DR.
City-State-Zip:	TAMPA FL 33647

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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: VALERIE KING**DIRECTOR OF FINANCE****02/16/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	BOARD MEMBER
Name	KELLY, SHARON
Address	10000 NORTH GREAT NECK ROAD
City-State-Zip:	VIRGINIA BEACH VA 23454