

**2025 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000002277

**Entity Name:** UNFOLDINGWORD CORPORATION**Current Principal Place of Business:**13485 VETERAN'S WAY, SUITE 460  
ORLANDO, FL 32827**Current Mailing Address:**13485 VETERANS WAY, SUITE 460  
ORLANDO, FL 32827 US**FEI Number: 14-1888977****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**REEVES, DAVID  
13485 VETERANS WAY, SUITE 460  
ORLANDO, FL 32827 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	C
Name	VOS, MICHAEL
Address	1712 PENNSYLVANIA AVE
City-State-Zip:	DES MOINES IA 50316

Title	VC
Name	ANDERS, MAX DR.
Address	6575 W MALLARD LN
City-State-Zip:	MCCORDSVILLE IN 46055-9402

Title	P
Name	REEVES, DAVID
Address	330 FIELDSTREAM BLVD
City-State-Zip:	ORLANDO FL 32825

Title	T
Name	ERICKSON, AARON
Address	3216 E BELL CANYON RD
City-State-Zip:	SANDY UT 84092

Title	SECRETARY
Name	ANDERSTROM, ALAN
Address	1056 110TH STREET
City-State-Zip:	ROBERTS WI 54023

Title	OTHER, BOARD
Name	HUNTER, JOEL
Address	203 SAVANNAH PARK LOOP
City-State-Zip:	CASSELBERRY FL 32707

*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: DAVID REEVES****CEO****02/10/2025**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date