

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

DOCUMENT# N16000007232

**Entity Name:** KISSIMMEE-POINCIANA HOMELESS OUTREACH, INC.

**Current Principal Place of Business:**

614 PARAKEET COURT  
KISSIMMEE, FL 34759

**Current Mailing Address:**

614 PARAKEET COURT  
KISSIMMEE, FL 34759 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MOTI, MITHLESHWARIE  
614 PARAKEET COURT  
KISSIMMEE, FL 34759 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	Title	S
Name	MOTI, MITHLESHWARIE	Name	AUSTRIA, ROMEL
Address	614 PARAKEET COURT	Address	614 PARAKEET COURT
City-State-Zip:	KISSIMMEE FL 34759	City-State-Zip:	KISSIMMEE FL 34759

*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:** MITHLESHWARIE MOTI

**PRESIDENT**

**03/26/2023**

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

\_\_\_\_\_  
Date