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

DOCUMENT# N93000003504

Entity Name: O.A.C. MINISTRIES, INCORPORATED

Current Principal Place of Business:

305 S HIGHLAND AVENUE APOPKA, FL 32703

**Current Mailing Address:** 

PO BOX 1509

APOPKA, FL 32704 US

FEI Number: 59-3203867 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COBB, SR., ORESTES A. 387 E SANDPIPER STREET APOPKA, FL 32712 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: ORESTES A COBB. SR. 08/08/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PCD Title VD

Name COBB, SR., ORESTES A Name COBB, JENNIFER T

Address 387 E SANDPIPER STREET Address 387 E SANDPIPER STREET

City-State-Zip: APOPKA FL 32712 City-State-Zip: APOPKA FL 32712

Title D Title D

Name SMITH, INGRID Name COBB, ORENTE' A

Address 709 BRIARCLIFFE STREET Address 6754 KNIGHTSWOOD DR

City-State-Zip: SANFORD FL 32773 City-State-Zip: ORLANDO FL 32818

Title D. Title D

NameEDWARDS, CARLTONNameWRIGHT, LORENZOAddressP.O. BOX 1542Address638 SITKA COURT

City-State-Zip: APOPKA FL 32704 City-State-Zip: APOPKA FL 32703

Title D

Name HARRIS, OCTAVIA A
Address 3040 FALCONHILL DR
City-State-Zip: APOPKA FL 32712

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: OCTAVIA HARRIS DIRECTOR 08/08/2021

Electronic Signature of Signing Officer/Director Detail

Date

FILED Aug 08, 2021

**Secretary of State** 

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