

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90244 007 ****61.25



DOCUMENT # 851838

1. Entity Name
CHINA OUTREACH MINISTRIES, INC.

Principal Place of Business
**940 CENTURY DRIVE
 MECHANICSBURG, PA 17055 US**

Mailing Address
**PO BOX 35
 MECHANICSBURG, PA 17055 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
52-0883435

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCINTOSH, MRS. EVELYN N.
 6152 VERDE TRAIL NORTH
 #E216
 BOCA RATON, FL 33433**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD Delete
 NAME GOON, THOMAS
 STREET ADDRESS 6507 LEWIS RD
 CITY-ST-ZIP BALDWIN, MD

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE CD Delete
 NAME WALSTON, CLAUDE DR.
 STREET ADDRESS 4340 LEEDS HALL DR
 CITY-ST-ZIP OLNEY, MD

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD Delete
 NAME MCINTOSH, EVELYN, MRS.
 STREET ADDRESS 6150 VERDE TRAIL NORTH, #E216
 CITY-ST-ZIP BOCA RATON, FL

TITLE Change Addition
 NAME ~~SELLEVAAG, LINDA~~
 STREET ADDRESS 4107 HUMMER ROAD
 CITY-ST-ZIP ANNANDALE, VA 22003

TITLE P Delete
 NAME OSBORN, GLEN REV
 STREET ADDRESS 1063 EPPLEY ROAD
 CITY-ST-ZIP MECHANICSBURG, PA 17055

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME STEVENSON, JOHN REV
 STREET ADDRESS 4259 MORE FIELD RD
 CITY-ST-ZIP HERMITAGE, PA 16148

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE T Delete
 NAME ROHRBACH, L.E.
 STREET ADDRESS 1027 PEGGY DRIVE
 CITY-ST-ZIP HUMMELSTOWN, PA 17036

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

Glendon Osborn

GLENDON OSBORN, PRES.

1-6-06

717 591-3500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #