

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 17, 2003 8:00 am**  
**Secretary of State**

01-17-2003 90045 013 \*\*\*\*61.25

**DOCUMENT # 851838**

1. Entity Name

**CHINA OUTREACH MINISTRIES, INC.**



Principal Place of Business

**3621 HIGHLAND PLACE  
FAIRFAX VA 22033  
US**

Mailing Address

**PO BOX 310  
FAIRFAX VA 22033  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **52-0883435**

Applied For

Not Applicable

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

**FILE NOW: FEE IS \$61.25**

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

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TITLE	NAME	TITLE	NAME
VPD	GOON, THOMAS		
6507 LEWIS RD	BALDWIN MD		
CD	WALSTON, CLAUDE DR.		
4340 LEEDS HALL DR	OLNEY MD		
SD	MCINTOSH, EVELYN, MRS.		
6150 VERDE TRAIL NORTH, #E216	BOCA RATON FL		
P	OSBORN, GLEN REV		
1063 EPPLEY ROAD	MECHANICSBURG PA 17055		
D	STEVENSON, JOHN REV		
4259 MORE FIELD RD	HERMITAGE PA 16148		
T	ROHRBACH, L.E.		
10911 BLUE ROAN ROAD	OAKTON VA 22124		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Glen Osborn*  
**REQUIRED**

**GLEN OSBORN**

**PRESIDENT 1-9-03**

**703 273 3500**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

CR2E037 (10/02)