

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004908

FILED  
Jan 15, 2007  
Secretary of State

Entity Name: MIDWEST CHRISTIAN OUTREACH, INC.

**Current Principal Place of Business:**

PO BOX 446  
WONDER LAKE, IL 600970446

**New Principal Place of Business:**

9406 CREEKSIDE DR.  
WONDER LAKE, IL 60097

**Current Mailing Address:**

PO BOX 446  
WONDER LAKE, IL 600970446

**New Mailing Address:**

FEI Number: 36-4012401      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GHOLSON, DIANE  
3338 LANDOVER BLVD.  
SPRING HILL, FL 34609      US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: VEINOT, L L JR  
Address: 9406 CREEKSIDE DR.  
City-St-Zip: WONDER LAKE, IL 60097

Title: VD      ( ) Delete  
Name: VEINOT, JOY A  
Address: 9406 CREEKSIDE DR.  
City-St-Zip: WONDER LAKE, IL 60097

Title: SD      ( ) Delete  
Name: KALIN, WILLIAM J  
Address: 45W 637 MARIE ST.  
City-St-Zip: BIG ROCK, IL

Title: OD      ( ) Delete  
Name: TODD, MCGEHEE  
Address: 1206 DOGWOOD LN  
City-St-Zip: CAROL STREAM, IL 60188

Title: OD      ( ) Delete  
Name: WILLIAM, CWIK  
Address: 151 N. FLORA PKWY  
City-St-Zip: ADDISON, IL 60101

Title: OD      ( ) Delete  
Name: RONALD, HENZEL  
Address: 4102 SW 13TH AVE  
City-St-Zip: CAPE CORAL, FL 33914

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: L.L. VEINOT JR.

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

01/15/2007

\_\_\_\_\_  
Date