## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000006660

FILED Apr 27, 2009 Secretary of State

Entity Name: CHRISTIAN OUTREACH OF S.W. FLORIDA, INC.

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
8191 COLLEGE PKWY.				2714 OAK RIDGE COURT		
#205 FT. MYER	RS, FL 33919		SUITE 60 FT. MYE	71 RS, FL 33901		
Current Mailing Address:				New Mailing Address:		
#205	LEGE PKWY.		SUITE 60			
	RS, FL 33919 :: <b>59-3753711</b>	FEI Number Applied For ( )	FEI Number Not Ap	RS, FL 33901	rtificate of Status Desired (X)	
		urrent Registered Agent:	•	. , ,	Registered Agent:	
		ullelit Registered Agent.			Registered Agent.	
SWEENEY, JEANNE 8191 COLLEGE PKWY. FT. MYERS, FL 33919 US			2714 OA	SWEENEY, JEANNE 2714 OAK RIDGE COURT SUITE 601 FT. MYERS, FL 33901 US		
	e named entity s e of Florida.	submits this statement for the	purpose of changing	g its registered office	e or registered agent, or both,	
SIGNATU	RE: JEANNE	M. SWEENEY			04/27/2009	
	Electron	ic Signature of Registered Ag	jent		Date	
OFFICERS AND DIRECTORS:			ADDITIC	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () FORSTER, MAF 2104 DEL PRAI CAPE CORAL,	DO BLVD	Title: Name: Address: City-St-Zip:		ange ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () MORAN, JOHN 4790 S. CLEVE FORT MYERS,		Title: Name: Address: City-St-Zip:	.,	ange ( ) Addition	
Title: Name: Address: City-St-Zip:	MCCLEARY, M	SE COURT SUITE 301	Title: Name: Address: City-St-Zip:	. ,	ange ( ) Addition	
Title: Name: Address: City-St-Zip:	MORELAND, DA	TY POINTE DR. SUITE 100	Title: Name: Address: City-St-Zip:	MORELAND, DAVID 7950 SUMERLIN LA	KE DRIVE SUITE 1	
Title: Name: Address: City-St-Zip:	S () MOORE, JANE 13515 BELL TO FORT MYERS,	WER DR.	Title: Name: Address: City-St-Zip:	MOORE, JANET 5216 SUMMERLIN		
Title: Name:	D () FORSTER, MAR	Delete RK	Title: Name:	BM (X) Cha SWEENEY, JEANN	ange ( ) Addition E	

I hereby certify that the information supplied with this filing does not qualify 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: JEANNE M. SWEENEY BM 04/27/2009