2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2004
Secretary of State

DOCUMENT# N01000000677

Entity Name: SHEPHERD'S WAY INTERDENOMINATIONAL OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

1209 CARR STREET
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

1209 CARR STREET
PALATKA, FL 32177

New Mailing Address:

FEI Number: 59-3723201 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, WILLIAM JR.
209 HOLLY LANE
PALATKA, FL 32177 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: P ( ) Delete
Name: HARRIS, WILLIAM JR.
Address: 209 HOLY LANE
City-St-Zip: PALATKA, FL 32177

Title: SD ( ) Delete
Name: CROWLEY, GALE
Address: 1103 NORTH 16TH STREET
City-St-Zip: PALATKA, FL 32177

Title: TD ( ) Delete
Name: PERRY, JERELENE
Address: 207 PUTNAM AVENUE
City-St-Zip: PALATKA, FL 32177

Title: VD ( ) Delete
Name: HARRIS, JOHNNIE
Address: 209 HOLLY LANE
City-St-Zip: PALATKA, FL 32177

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM HARRIS PRES 05/13/2004

Electronic Signature of Signing Officer or Director — Date