

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001629

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** THY KINGDOM OUTREACH, INC.

**Current Principal Place of Business:**

524 SO BUENA VISTA AVE  
ORLANDO, FL 32835

**New Principal Place of Business:**

3313 SAINT MARTIN LANE  
CLERMONT, FL 34711

**Current Mailing Address:**

524 SO BUENA VISTA AVE  
ORLANDO, FL 32835

**New Mailing Address:**

3313 SAINT MARTIN LANE  
CLERMONT, FL 34711

FEI Number: 59-3704001

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WARREN, JOE L  
524 SO BUENA VISTA AVE  
ORLANDO, FL 32835 US

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

WARREN, JOE L  
3313 SAINT MARTIN LANE  
CLERMONT, FL 34711 US

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:

04/27/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WARREN, JOE L  
Address: 3313 SAINT MARTIN LANE  
City-St-Zip: CLERMONT, FL 34711

Title: D  
Name: WARREN, PARCELLA  
Address: 3313 SAINT MARTIN LANE  
City-St-Zip: CLERMONT, FL 34711

Title: TRUS  
Name: PHILLIP, ANN  
Address: 1112 SMITH ST  
City-St-Zip: GLENNVILLE, GA 30427

I hereby 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 all other like empowered.

SIGNATURE: PARCELLA WARREN

D

04/27/2010

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

\_\_\_\_\_  
Date