2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2007
Secretary of State

DOCUMENT# N01000001869

Entity Name: THE GLORY TEAM REACH OUT AND TOUCH MINISTRY, INC., INTERNATIONAL

Current Principal Place of Business:

1101 WEST MARTIN LUTHER KING JR. BLVD
SUITE 1101
SEFFNER, FL 33584

New Principal Place of Business:

Current Mailing Address:

PO BOX 1162
BRANDON, FL 335091162

New Mailing Address:

FEI Number: 59-3703958 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCCALLA, IDA M
350 LAKEWOOD DRIVE
APT, # 38
BRANDON, FL 335104436 US

Name and Address of New Registered Agent:

MCCRAY, IDA M
350 LAKEWOOD DRIVE
APT, # 38
BRANDON, FL 335104436 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: IDA M. MCCRAY 04/08/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MILLS, VENORIA N
Address: 831 TUSCANNY ST
City-St-Zip: BRANDON, FL 33511

Title: D ( ) Delete
Name: MCCALLA, IDA M
Address: 350 LAKEWOOD DRIVE, APT # 38
City-St-Zip: BRANDON, FL 335104036

Title: D ( ) Delete
Name: CAMBELL, PAULETTE
Address: 4410 COUNTRY HILLS BLVD
City-St-Zip: PLANT CITY, FL 33563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: MCCRAY, IDA M
Address: 350 LAKEWOOD DRIVE, APT # 38
City-St-Zip: BRANDON, FL 335104036

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: IDA M. MCCRAY D 04/08/2007
Electronic Signature of Signing Officer or Director Date