2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2009
Secretary of State

DOCUMENT# N03000007798

Entity Name: CITY WIDE EVANGELISTIC OUTREACH MINISTRY, INC.

Current Principal Place of Business:

4192 GALLIMORE ST
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

4192 GALLIMORE ST
ORLANDO, FL 32811

New Mailing Address:

FEI Number: 43-2045303 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COOPER, JEWELL
4192 GALLIMORE ST
ORLANDO, FL 32811 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:	COOPER, JEWELL	
Address:	4192 GALLIMORE ST	
City-St-Zip:	ORLANDO, FL 32811	
Title:	T	( ) Delete
Name:	TURMAN, GRACIE	
Address:	108 LEONARD CT	
City-St-Zip:	ORLANDO, FL 32811	
Title:	S	( ) Delete
Name:	PENDER, MILDRED	
Address:	4662 OLIVA ST	
City-St-Zip:	ORLANDO, FL 32811	
Title:	D	( ) Delete
Name:	FERRAND, ELONE	
Address:	6301 LAKEWESTERN PT	
City-St-Zip:	ORLANDO, FL	
Title:	D	( ) Delete
Name:	BROWN, MARY	
Address:	1409 KOZART	
City-St-Zip:	ORLANDO, FL 32811	
Title:	D	( ) Delete
Name:	WILLIAMS, MAE	
Address:	3303 WALLER PLACE	
City-St-Zip:	ORLANDO, FL 32805	

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 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: MILDRED PENDER S 05/08/2009

Electronic Signature of Signing Officer or Director — Date