

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000733

FILED
Apr 23, 2006
Secretary of State

Entity Name: OUTREACH CHURCH INTERNATIONAL, INC.

Current Principal Place of Business:

117 E. BRIDGERS AVE
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

117 E. BRIDGERS AVE
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 59-3293317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FYOCK, DEBORAH S
5915 SR 542 W.
WINTER HAVEN, FL 33880 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: FYOCK, SAMUEL R III
Address: 5915 SR 542 W.
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: FYOCK, DEBORAH S
Address: 5915 SR 542 W.
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: MICHAEL, LINDERMAN D
Address: 101 BRIDGET LN
City-St-Zip: AUBURNDALE, FL 33823

Title: D () Delete
Name: OPPENHEIMER, RICHARD K
Address: 611 BERKLEY POINTE PLACE
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: MICHAEL, LINDERMAN D
Address: 9291 KLIBER DR.
City-St-Zip: WINTER HAVEN, FL 33884

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: SAMUEL R. FYOCK, III

P

04/23/2006

Electronic Signature of Signing Officer or Director

Date