

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000932

FILED
Feb 12, 2009
Secretary of State

Entity Name: OPEN ARMS URBAN MINISTRIES, INC.

Current Principal Place of Business:

1314 EAST 18TH AVENUE
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

1312 EAST 18TH AVENUE
TAMPA, FL 33605

New Mailing Address:

FEI Number: 59-3444228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VICENTE, JOEL
2436 AMBERSIDE RD
WESLEY CHAPEL, FL 33543 US

Name and Address of New Registered Agent:

VICENTE, JOEL
2436 AMBERSIDE RD
WESLEY CHAPEL, FL 33544 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:

02/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VICENTE, JOEL
Address: 2436 AMBERSIDE RD
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D () Delete
Name: VICENTE, KRISTI L
Address: 2436 AMBERSIDE RD
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: SD () Delete
Name: JAMES, MARTINEZ
Address: 9914 TIMMONS RD
City-St-Zip: THONOTOSASSA, FL 33592

Title: TD () Delete
Name: ANDREWS, ZANE
Address: PO BOX 310487
City-St-Zip: TAMPA, FL 33680

Title: D () Delete
Name: ANDREWS, PHOEBE
Address: PO BOX 310487
City-St-Zip: TAMPA, FL 33680

Title: D () Delete
Name: MARTINEZ, VALERIE
Address: 9914 TIMMONS RD
City-St-Zip: THONOTOSASSA, FL 33592

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VICENTE, JOEL
Address: 2436 AMBERSIDE RD
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D (X) Change () Addition
Name: VICENTE, KRISTI L
Address: 2436 AMBERSIDE RD
City-St-Zip: WESLEY CHAPEL, FL 33544

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: D (X) Change () Addition
Name: MARTIN, AMBER
Address: 2908 W BURKE ST.
City-St-Zip: TAMPA, FL 33614

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: JOEL VICENTE

PD

02/12/2009

Electronic Signature of Signing Officer or Director

Date