2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2004
Secretary of State

DOCUMENT# 723038

Entity Name: WORLDWIDE OUTREACH FOR CHRIST, INC.

Current Principal Place of Business:

4811 WEST UNIVERSITY DR
EDINBURG, TX 78539 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4494
MCALLEN, TX 78502 US

New Mailing Address:

FEI Number: 23-7225920 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCMULLEN, JAMES R.
5713 VERNA WAY
MILTON, FL 32570 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:	PC	( ) Delete
Name:	TISDALE, JOHN DR.	
Address:	216 E US HWY 83	
City-St-Zip:	MCALLEN, TX	
Title:	STD	( ) Delete
Name:	TISDALE, CAROL	
Address:	216 E US HWY 83	
City-St-Zip:	MCALLEN, TX	
Title:	D	( ) Delete
Name:	DANIEL, WILLIAM F.,	
Address:	127 E. PARK AVE.	
City-St-Zip:	TALLAHASSEE, FL	
Title:	D	( ) Delete
Name:	TISDALE, STEPHEN M	
Address:	RR 7 BOX 293 BB	
City-St-Zip:	MISSION, TX 78572	

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:	D	(X) Change ( ) Addition
Name:	TISDALE, STEPHEN M	
Address:	5601 N. 4TH ST	
City-St-Zip:	MCALLEN, TX 78504	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHNTISDALE DR. 01/30/2004

Electronic Signature of Signing Officer or Director — Date