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2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Jun 16, 2003 8:00 am **Secretary of State** DOCUMENT # 723038 06-16-2003 90142 040 ****61.25 1. Entity Name WORLDWIDE OUTREACH FOR CHRIST, INC. Principal Place of Business Mailing Address PO BOX 4494 216 E US HWY 83 MCALLEN TX 78501 MCALLEN TX 78502 2. Principal Place of Business 3. Mailing Address 4811 West University Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State 4. FEI Number 23-7225920 City & State Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCMULLEN, JAMES R. Street Address (P.O. Box Number is Not Acceptable) 5713 VERNA WAY MILTON FL 32570 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 П Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change Addition TISDALE, JOHN DR. NAME NAME 216 E US HWY 83 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MCALLEN TX TITLE ☐ Delete TITLE ☐ Change TISDALE, CAROL NAME NAME 216 E US HWY 83 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP MCALLEN TX TITLE TITLE Change Addition GEORGE, JESSE NAME NAME STREET ADDRESS 4811 W STATE HWY 107 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **EDINBURG TX** TITLE ☐ Delete TITLE ☐ Change Addition DANIEL, WILLIAM F. NAME NAME STREET ADDRESS STREET ADDRESS 127 E. PARK AVE. CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL TITLE ☐ Delete TITLE ☐ Change ■ Addition TISDALE, STEPHEN M NAME NAME STREET ADDRESS RR 7 BOX 293 BB STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MISSION TX 78572 TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with arrangement with arrangement with arrangement with arrangement of the corporation of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with arrangement with arrangement of the corporation o

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SIGNATURE:

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W.Tisdale 6-10-03 956-687-9060