2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741524

FILED Mar 20, 2009 Secretary of State

Entity Name: MISSIONARY EVANGELIST OUTREACH CENTER HOLINESS CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 1766 N.W. 95 STREET MIAMI, FL 33147 **Current Mailing Address: New Mailing Address:** C/O LA FARIES MORTIMER 3230 N.W. 151ST TERRACE OPA LOCKA, FL 33054 FEI Number: 65-0028303 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORTIMER, LA FARIES Y 3230 N.W. 151ST TERRACE OPA LOCKA, FL 33054 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KEMP, JOHNNY L Name: Name: 3950 N.W. 177TH STREET Address: Address: City-St-Zip: CAROL CITY, FL 33055 City-St-Zip: Title: VD () Delete Title: () Change () Addition KEMP, PATTY L Name: Name: Address: 3950 NW 177TH ST Address: City-St-Zip: CAROL CITY, FL 33055 City-St-Zip: Title: () Delete Title: (X) Change () Addition KEMP, OTIS L MUMFORD, TADERRYL Name: Name: Address: 3910 NW 177TH STREET Address: 1800 NW 85TH STREET City-St-Zip: CAROL CITY, FL 33055 City-St-Zip: MIAMI, FL 33147 Title: SD () Delete Title: () Change () Addition Name: MORTIMER, CHRISTINE Name: Address: 4230 NW 173 DR Address: City-St-Zip: CAROL CITY, FL 33055 City-St-Zip: Title: () Delete Title: (X) Change () Addition VAN-REIL, KARL PETERS, WILENA Name: Name: 7607 W 40TH STREET 20861 NW 9TH COURT #204 Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: MIAMI, FL 33169 Title: () Delete Title: () Change () Addition MORTIMER, LAFARIES Name: Name: Address: 3230 N.W. 151ST TERRACE Address: OPA LOCKA, FL 33054 City-St-Zip: 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: LAFARIES MORTIMER T 03/20/2009