## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000000771

FILED Jul 14, 2008 Secretary of State

Entity Nar	ne: WORLD WIDE MISSIONS OUTREACH, INC	). 
Current Pi	rincipal Place of Business:	New Principal Place of Business:
	BERRY WAY OSA BEACH, FL 32459	
Current Mailing Address:		New Mailing Address:
	BERRY WAY OSA BEACH, FL 32459	
	43-1787661 FEI Number Applied For() FE se with s. 607.193(2)(b), F.S., the corporation did not rece Address of Current Registered Agent:	Il Number Not Applicable ( ) Certificate of Status Desired (X) eive the prior notice.  Name and Address of New Registered Agent:
200 HACKI	NN, RUSSELL BERRY WAY DSA BEACH, FL 32459 US	
The above in the State	named entity submits this statement for the purpo of Florida.	ose of changing its registered office or registered agent, or both,
SIGNATUR	RE:	
	Electronic Signature of Registered Agent	Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	CP () Delete STEGEMANN, RUSSELL 200 HACKBERRY WAY SANTA ROSA BEACH, FL 32459	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VP ( ) Delete RITT, DENNIS 11515 WESTCOLD SPRING AVE. GREENFIELD, WI 53228	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete TEOFRO, RAY 6929 STONE RD PORT RICHEY, FL 34688	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S ( ) Delete STAGEMENN, KIMM 200 HACKBERRY WAY SANTA ROSA BEACH, FL 32459	Title: S (X) Change ( ) Addition Name: STEGEMANN, KIMM Address: 200 HACKBERRY WAY City-St-Zip: SANTA ROSA BEACH, FL 32459

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: RUSSELL STEGEMANN CP 07/14/2008