

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001901

FILED
Jan 09, 2009
Secretary of State

Entity Name: WORD OF GOD OUTREACH, INC.

Current Principal Place of Business:

312 NORTH MAIN STREET
BROKEN ARROW, OK 74012

New Principal Place of Business:

1214 FOUR SEASONS BLVD
TAMPA, FL 33613

Current Mailing Address:

PO BOX 1286
LUTZ, FL 33548

New Mailing Address:

FEI Number: 73-1454512 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMERON, EUGENE M
1214 FOUR SEASONS BLVD
TAMPA, FL 33613 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: CP () Delete
Name: CAMERON, EUGENE M
Address: PO BOX 1286
City-St-Zip: LUTZ, FL 33548

Title: VST () Delete
Name: CAMERON, PRISCILLA A
Address: PO BOX 1286
City-St-Zip: LUTZ, FL 33548

Title: D () Delete
Name: GONZALEZ, CASSANDRA
Address: 1214 FOUR SEASONS BLVD
City-St-Zip: TAMPA, FL 33613

Title: D () Delete
Name: WISE, BRIAN
Address: 22194 160TH AVE
City-St-Zip: MILACA, MN 56353

Title: D () Delete
Name: WISE, DIANA
Address: 22194 160TH AVE
City-St-Zip: MILACA, MN 56353

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: WISE, BRIAN
Address: 7659 130TH AVE
City-St-Zip: MILACA, MN 56353

Title: D (X) Change () Addition
Name: WISE, DIANA
Address: 7659 130TH AVE
City-St-Zip: MILACA, MN 56353

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: PRISCILLA CAMERON

VST

01/09/2009

Electronic Signature of Signing Officer or Director

Date