

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001995

FILED
May 03, 2009
Secretary of State

Entity Name: ONE WAY OUT MINISTRIES, INC.

Current Principal Place of Business:

3300 N KEY DRIVE
10 E
NORTH FORT MYERS, FL 33903 US

New Principal Place of Business:

1413 COLONIAL BOULEVARD
FORT MYERS, FL 33907 US

Current Mailing Address:

3300 N KEY DRIVE
10 E
NORTH FORT MYERS, FL 33903 US

New Mailing Address:

4701 SUMMERLIN ROAD
FORT MYERS, FL 33919 US

FEI Number: 20-5992723 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

AWS, SHERI
12621 KELLY SANDS WAY
UNIT 328
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

AWS, SHERI
120 SOUTH ROAD
FORT MYERS, FL 33907 US

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:

05/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TURNER, MARGARET
Address: 3300 N KEY DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: V () Delete
Name: LADOTO, PAUL
Address: 40000 HORSESHOE RD
City-St-Zip: PUNTA GORDA, FL 33982 US

Title: T () Delete
Name: DOVER, GAIL
Address: 8879 HWY 195
City-St-Zip: JASPER, AL 35503 US

Title: S () Delete
Name: AWS, SHERI
Address: 12621 KELLY SANDS WAY, UNIT 328
City-St-Zip: FORT MYERS, FL 33908 US

Title: D () Delete
Name: MEISER, MICHELLE
Address: 12979 PLANTATION ROAD
City-St-Zip: FORT MYERS, FL 33912 US

Title: D () Delete
Name: LAMBERT, JANICE
Address: 17100 TAMiami TRAIL 83
City-St-Zip: PUNTA GORDA, FL 33955 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: LODATO, PAUL
Address: 40000 HORSESHOE RD
City-St-Zip: PUNTA GORDA, FL 33982 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: AWS, SHERI
Address: 120 SOUTH ROAD
City-St-Zip: FORT MYERS, FL 33907 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: SHERI AWS

S

05/03/2009

Electronic Signature of Signing Officer or Director

Date