

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003833

FILED  
Jan 30, 2007  
Secretary of State

**Entity Name:** TAYLOR OUTREACH MINISTRIES, INC.

**Current Principal Place of Business:**

112 E. TEVER ST.  
PLANT CITY, FL 33563

**New Principal Place of Business:**

**Current Mailing Address:**

813 CHADSWORTH AVENUE  
SEFFNER, FL 33584

**New Mailing Address:**

**FEI Number:** 59-3651620

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAYLOR, CYNTHIA DIXON  
813 CHADSWORTH AVENUE  
SEFFNER, FL 33584 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: D (X) Delete  
Name: TAYLOR, JERRY RICHARD  
Address: 813 CHADSWORTH AVENUE  
City-St-Zip: SEFFNER, FL 33584 US

Title: VPD ( ) Delete  
Name: TAYLOR, JERRY B  
Address: 813 CHADSWORTH AVE.  
City-St-Zip: SEFFNER, FL 33584 US

Title: PSTD ( ) Delete  
Name: DIXON TAYLOR, CYNTHIA  
Address: 813 CHADSWORTH AVE.  
City-St-Zip: SEFFNER, FL 33584 US

Title: D (X) Delete  
Name: BELCHER, PHYLLIS A  
Address: 2207 PAR MEADOWS LN  
City-St-Zip: PLANT CITY, FL 33566 US

Title: VPD (X) Delete  
Name: BELCHER, JAMES L  
Address: 2207 PAR MEADOWS LN  
City-St-Zip: PLANT CITY, FL 33566 US

Title: D (X) Delete  
Name: MOORE, RONDA S  
Address: 2780 E. FOWLER AVE. STE 204  
City-St-Zip: TAMPA, FL 33612 US

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

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 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: CYNTHIA DIXON TAYLOR

PRES

01/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date