2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2009
Secretary of State

DOCUMENT# N00000003833

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:

502 GAY RD
SEFFNER, FL 33584

New Mailing Address:

FEI Number: 59-3651620 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

TAYLOR, CYNTHIA DIXON
502 GAY RD
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: VPD ( ) Delete
Name: TAYLOR, JERRY B
Address: 502 GAY RD
City-St-Zip: SEFFNER, FL 33584 US

Title: PSTD ( ) Delete
Name: DIXON TAYLOR, CYNTHIA
Address: 502 GAY RD
City-St-Zip: SEFFNER, FL 33584 US

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

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

Title: D ( ) Delete
Name: TAYLOR, JERRY R
Address: 813 CHADSWORTH AVE
City-St-Zip: SEFFNER, FL 33584

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: VPD (X) Change ( ) Addition
Name: TAYLOR, JERRY R
Address: W2744 BROOKHAVEN DR.
City-St-Zip: APPLETON, WI 54915

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: CYNTHIA DIXON TAYLOR PSTD 05/26/2009

Electronic Signature of Signing Officer or Director — Date