# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000003958

FILED Jun 28, 2006 Secretary of State

Entity Name: GLOBAL OUTREACH MINISTRY NETWORK, INC.

Current Principal Place of Business: New Principal Place of Business:

3749-D GULF BREEZE PARKWAY SUITE 305

GULF BREEZE, FL 32563

Current Mailing Address: New Mailing Address:

3749-D GULF BREEZE PKWY SUITE 305 GULF BREEZE, FL 32563

FEI Number: 59-3652778 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: Name and Address of New Registered Agent:

ANDERSON, VICTORIA 211 CREEKVIEW DR WEWAHITCHKA, FL 32465 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:

Flatonia Cincolne CD vistoral Annal

### Electronic Signature of Registered Agent

#### Date

#### **OFFICERS AND DIRECTORS:**

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 ( ) Delete

 Name:
 LEE, MICHAEL A

 Address:
 2596 MARY FOX DR

City-St-Zip: GULF BREEZE, FL 32563

Title: VPD ( ) Delete
Name: LEE, KIMBERLY D
Address: 2596 MARY FOX DR

Address: 2596 MARY FOX DR City-St-Zip: GULF BREEZE, FL 32563

Title: D () Delete

Name: ANDERSON, VICTORIA
Address: 211 CREEKVIEW DR 632465
City-St-Zip: DECATUR, AL 35603

Title: PD (X) Change ( ) Addition

Name: LEE, MICHAEL A

Address: 390 TYNDALL PARKWAY #135 City-St-Zip: PANAMA CITY, FL 32404

Title: VPD (X) Change ( ) Addition

Name: LEE, KIMBERLY D

Address: 390 TYNDALL PARKWAY #135 City-St-Zip: PANAMA CITY, FL 32404

Title: D (X) Change ( ) Addition

Name: ANDERSON, VICTORIA
Address: 211 CREEKVIEW DR
City-St-Zip: WEWAHITCHKA, FL 32465

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: MICHAEL A. LEE PD 06/28/2006