## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000005366

FILED May 03, 2006 Secretary of State

Entity Name: FREEDOM OUTPOST MINISTRIES INC.			
Current Principal Place of Business:		New Princ	ipal Place of Business:
	DURNE AVE. NE, FL 32901		
Current Mailing Address:		New Mailing Address:	
	DURNE AVE. NE, FL 32901		
	e with s. 607.193(2)(b), F.S., the corporation did not receive		e.
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
HAGE, JAMES 625 BANKS ST. NW PALM BAY, FL 32907 US		HAGE, JAMES 3233 SEA OATS CIRCLE MELBOURNE BEACH, FL 32951 US	
The above in the State	named entity submits this statement for the purpose of Florida.	of changing i	ts registered office or registered agent, or both,
SIGNATURE: JAMES HAGE			05/03/2006
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () Delete HAGE, JAMES 625 BANKS ST NW PALM BAY, FL 32907	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition HAGE, JAMES 3233 SEA OATS CIRCLE MELBOURNE BEACH, FL 32951
Title: Name: Address: City-St-Zip:	D () Delete HAGE, GINA 625 BANKS ST. NW PALM BAY, FL 32907	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition HAGE, GINA 3233 SEA OATS CIRCLE MELBOURNE BEACH, FL 32951
Title: Name: Address: City-St-Zip:	D () Delete MURRAY, ETHEL 1367 ALCAZAR ST PALM BAY, FL 32908	Title: Name: Address: City-St-Zip:	T (X) Change () Addition MURRAY, ETHEL 1367 ALCAZAR ST PALM BAY, FL 32908
Title: Name: Address: City-St-Zip:	T (X) Delete BERRY, DARRELL J 1074 CITRUS AVE NE PALM BAY, FL 32905	Title: Name: Address: City-St-Zip:	()Change ()Addition

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: JAMES HAGE D 05/03/2006