2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000005786

Entity Name: IN-TOUCH EVANGELISTIC OUTREACH MINISTRIES, INC.

FILED May 01, 2002 8:00 AM Secretary of State

Current Pri	incipal Place	e of Business:	New Princ	New Principal Place of Business:			
412 ALEAT DAYTONA	HA DRIVE BEACH, FL	32114					
Current Mailing Address:			New Mailii	New Mailing Address:			
	ICE BOX 108 BEACH, FL						
FEI Number:	59-3653208	FEI Number Applied For()	FEI Number Not Appli	cable ()	Certificate of Status Desired	(X)	
Name and	Address of (Current Registered Agent:	Name and	Address of	New Registered Agent:		
412 ALEAT		AVANT-FUQUA 32114 US					
The above in the State		submits this statement for the pu	urpose of changing it	s registered	office or registered agent, or	both,	
SIGNATUR	E:						
	Electro	nic Signature of Registered Ager	nt		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	FUQUA, DANN 412 ALEATHA		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	TRIMBLE, VAN 1233 SOUTH E) Delete IESSA BEACH STREET #1064 ACH, FL 32114	Title: Name: Address: City-St-Zip:	STD (X TRIMBLE, VAI 5031 W. SUPI CHICAGO, IL	ERIOR		
Title: Name: Address: City-St-Zip:	COPELAND, E 400 SCHOOL) Delete :LIZABETH DR. STREET ACH, FL 32114	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	HAMILTON, SA 324 BARTLEY		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	THORNTON, J 180 BIG BEN I		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	POWERS, JOS 420 LAKEBRIE) Delete SEPHINE EVANG. DGE PLACE, @304 .CH, FL 32174	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 Section 119.07(3)(i), 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							

SIGNATURE: HORACE ANDERSON D 05/01/2002

above, or on an attachment with an address, with all other like empowered.

HORACE ANDERSON, BOARD MEMBER 1240 SOUTH NOVA ROAD APT. 104 DAYTONA BEACH, FL 32114