

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2008
Secretary of State

DOCUMENT# N00000005809

Entity Name: STEP IN FAITH OUTREACH CHURCH INC.

Current Principal Place of Business:

2920 HIGHLAND LK DR
DELTONA, FL 32738

New Principal Place of Business:

2920 HIGHLAND LKS DR
DELTONA, FL 32738

Current Mailing Address:

P.O.BOX 390564
DELTONA, FL 32738

New Mailing Address:

2920 HIGHLAND LKS DR
DELTONA, FL 32738

FEI Number: 31-1768346 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:

RAMOS, WILFREDO
2920 HIGHLAND LK DR
DELTONA, FL 32738 US

Name and Address of New Registered Agent:

RAMOS, WILFREDO
2920 HIGHLAND LKS DR
DELTONA, FL 32738 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: _____

05/07/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAMOS, WILFREDO
Address: 2920 HIGHLAND LK DR
City-St-Zip: DELTONA, FL 32738

Title: D () Delete
Name: RAMOS, DELIA M
Address: 2920 HIGHLAND LK DR
City-St-Zip: DELTONA, FL 32738

Title: S () Delete
Name: OLIVERAS, NATASHA
Address: 1030 REGAL POINTE TERR
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: RAMIERZ, JOSE
Address: 1030 REGAL POINTE TERR
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: PEREZ, HECTOR
Address: 1072 HAVOR DRIVE
City-St-Zip: DELTONA, FL 32738

Title: D () Delete
Name: MATTHEWS, MARK
Address: 132 AURELIA COURT
City-St-Zip: KISSIMMEE, FL 34758

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 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: WILFREDO RAMOS

P

05/07/2008

Electronic Signature of Signing Officer or Director

Date