

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001153

FILED
Jul 20, 2011
Secretary of State

Entity Name: BYKOTA OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

137 SW NATIVITY TERR
PORT SAINT LUCIE, FL 34984

New Principal Place of Business:

Current Mailing Address:

137 SW NATIVITY TERR
PORT SAINT LUCIE, FL 34984

New Mailing Address:

FEI Number: 65-1088496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMILTON, WINSTON G
137 SW NATIVITY TERR
PORT SAINT LUCIE, FL 34984 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: D
Name: HAMILTON, WINSTON G
Address: 137 SW NATIVITY TERR
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: D
Name: HAMILTON, IDA
Address: 137 SW NATIVITY TERR
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: D
Name: CASON, ANNETTE
Address: 3008 HIBISCUS AVE
City-St-Zip: FT PIERCE, FL 34947

Title: PD
Name: HAMILTON, WINSTON G CHBC
Address: 137 SW NATIVITY TERR
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: SD
Name: HAMILTON, IDA W RN
Address: 137 SW NATIVITY TERR
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: TD
Name: CASON, ANNETTE MA
Address: 3008 HIBISCUS AVE
City-St-Zip: FORT PIERCE, FL 34947

I hereby 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 all other like empowered.

SIGNATURE: WINSTON G HAMILTON

PD

07/20/2011

Electronic Signature of Signing Officer or Director

Date