

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 16, 2007  
Secretary of State**

DOCUMENT# N01000002835

Entity Name: GRACE BIBLE WAY HANDS ON OUTREACH MINISTRIES, INC.

**Current Principal Place of Business:**

17100 NW 27TH AVE.  
MIAMI, FL 33056

**New Principal Place of Business:**

**Current Mailing Address:**

4410 NW 187TH TERR.  
MIAMI, FL 33055

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

WILSON, IVORY  
3571 NW 2ND ST.  
FT. LAUDERDALE, FL 33311 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: PEART, DENISE D  
Address: 17100 NW 27TH AVE.  
City-St-Zip: MIAMI, FL 33056

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P ( ) Delete  
Name: PEART, KENRICK L  
Address: 17100 NW 27TH AVE.  
City-St-Zip: MIAMI, FL 33056

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V ( ) Delete  
Name: PEART, KENRICK C  
Address: 17100 NW 27TH AVE.  
City-St-Zip: MIAMI, FL 33056

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD ( ) Delete  
Name: PEART, KAYLA F  
Address: 17100 NW 27TH AVE.  
City-St-Zip: MIAMI, FL 33056

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: PEART, DOROTHY  
Address: 17100 NW 27TH AVE.  
City-St-Zip: MIAMI, FL 33056

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AS (X) Delete  
Name: PEART, KAYLA  
Address: 17100 NW 27TH AVE.  
City-St-Zip: MIAMI, FL 33056

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: KENRICK PEART

V

07/16/2007

Electronic Signature of Signing Officer or Director

Date