

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005593

FILED
Mar 13, 2007
Secretary of State

Entity Name: GREATER WORKS OUTREACH MINISTRY INC.

Current Principal Place of Business:

2025 S ADAMS ST
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

PO BOX 180507
TALLAHASSEE, FL 323180507

New Mailing Address:

FEI Number: 55-0915860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBINSON, KENNETH L
2301 OLD BAINBRIDGE RD
E-503
TALLAHASSEE, FL 32303 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: TC () Delete
Name: JACKSON, MAXWELL
Address: 306 WHITE DR APT B-2
City-St-Zip: TALLAHASSEE, FL 32304

Title: T () Delete
Name: LOWE, KOTENIA
Address: 2003 ROB WAY
City-St-Zip: TALLAHASSEE, FL 32304

Title: T () Delete
Name: BIVINS, DARLENE T
Address: 4258 SLOE DRIVE
City-St-Zip: TALLAHASSEE, FL 32310

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TC (X) Change () Addition
Name: JACKSON, MAXWELL
Address: 1839 MICCOSUKEE RD APT 15A
City-St-Zip: TALLAHASSEE, FL 32304

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

Title: T (X) Change () Addition
Name: BIVINS, DARLENE
Address: 4258 SLOE DRIVE
City-St-Zip: TALLAHASSEE, FL 32310

Title: T () Change (X) Addition
Name: LEWIS, ROSE
Address: 4197 JACKSON BLUFF
City-St-Zip: TALLAHASSEE, FL 32304

Title: T () Change (X) Addition
Name: SMART, TIFFANY
Address: 2858 BOTANY PLACE
City-St-Zip: TALLAHASSEE, FL 32301

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: MAXWELL JACKSON

TC

03/13/2007

Electronic Signature of Signing Officer or Director

Date