2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0200000981

CHRIST OUTREACH MISSION STOREHOUSE INC.



FILED Jul 09, 2003 8:00 am Secretary of State

07-09-2003 90044 001 ****70.00

PRICE DEFUNIAL SPRINGS FL 32433 2. Principal Place of Business Self U.S. 30 WEST DEFUNIAL SPRINGS FL 32433 2. Principal Place of Business Sulfa, Apr. 4. etc. Sulfa,						<u> </u>	GOD WE THE							
Suite. Apt. #, rice. City & State Service Address of Current Registered Agent T. Name and Address of New Registered Agent File Row, W.O. REV. Service Address (P.O. Box Number is Not Acceptable) Service Address (P.O. Box Number is Not Acceptable) City FL	8678 U.S. 90 V	West	3	8678 U.	8678 U.S. 90 WEST				S oc ial dir Cal	18 eibhí 80 lís 80 le	 1 841 18 11 18 1	11 A KATA 4010A TA	IDI 19 D 1 1 0 D1	
City & State Country	Principal Place of Business 3. Mailing Address													
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BRYAN, W.O. REV. 8678 U.S. 90 WEST DEFUNIAK SPRINGS FL 32433 6. The above named analy submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Forida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Forida. I am familiar with, and accept the obligations of registered agent. SIGNATURE By	Zip	Country				Col	untry	5 Certificate of Status Desired \$8.75 Additiona				ditional		
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City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar wan, and accept the obligation of the please of	8678 U.S. 90 WEST						Street Address (P.O. Box Number is Not Acceptable)							
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indicated on this report or supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE: