2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002389

FILED Apr 29, 2007 Secretary of State

Entity Name: DIVINE PROVIDENCE OF GOD OUTREACH MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 2567 15TH AVENUE SOUTH ST PETERSBURG, FL 33712 **Current Mailing Address: New Mailing Address:** P.O. BOX 16505 ST PETERSBURG, FL 337336505 FEI Number: 41-2058112 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HALLMON, LOLITA M 2567 15TH AVENUE ST PETERSBURG, FL 33712 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: () Change () Addition () Delete HALLMON, LOLITA M Name: Name: 2567 15TH AVENUE SOUTH Address: Address: City-St-Zip: ST PETERSBURG, FL 33712 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: WILLIAMS, DELORIS Name: RANSOM, COLLORS Address: 2567 15TH AVE S Address: 5150 1ST AVENUE NORTH City-St-Zip: ST PETERSBURG, FL 33712 City-St-Zip: ST PETERSBURG, FL 33710 Title: () Delete Title: (X) Change () Addition RANSOM, COLLORS WEBSTER, CARMELIA Name: Name: 5150 1ST AVENUE NORTH 3490 15TH AVENUE SOUTH Address: Address: City-St-Zip: ST PETERSBURG, FL 33710 City-St-Zip: ST PETERSBURG, FL 33711 Title: (X) Delete Title: () Change () Addition Name: WEBSTER, CARMELIA Name: Address: 3490 15TH AVENUE SOUTH Address: City-St-Zip: ST PETERSBURG, FL 33711 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: LOLITA HALLMON D 04/29/2007