

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 23, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000003980	
1. Entity Name COMMUNITY OUTREACH MINISTRY INCORPORATED	

Principal Place of Business 20111 NW 59 CT HIALEAH FL 33015	Mailing Address 20111 NW 59 CT HIALEAH FL 33015
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E037 (10/05)

4. FEI Number 55-0795604	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MARTIN, JESSE 20111 NW 59 CT HIALEAH FL 33015	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Jesse Martin President Jesse Martin March 21, 2006
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD	NAME MARTIN, JESSE REV. STREET ADDRESS 20111 NW 59 CT CITY-ST-ZIP HIALEAH FL 33015	☐ Delete	☐ Change ☐ Add
TITLE JD	NAME MARTIN, MARIE STREET ADDRESS 20111 NW 59 CT CITY-ST-ZIP HIALEAH FL 33015	☐ Delete	☐ Change ☐ Add
TITLE SD	NAME WEATHERSPOON, ISABELLE STREET ADDRESS 21133 NE 4CT. CITY-ST-ZIP MIAMI FL 33179	☐ Delete	☐ Change ☐ Add
TITLE NAME	STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Add
TITLE NAME	STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Add
TITLE NAME	STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Add
TITLE NAME	STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Add

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Jesse Martin March 21, 2006