

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005547

FILED
May 06, 2009
Secretary of State

Entity Name: LIVING HOPE IN CHRIST OUT REACH MINISTRY, INC.

Current Principal Place of Business:

615 SE 1ST AVE
HIGH SPRINGS, FL 32643

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 983
HIGH SPRINGS, FL 32655

New Mailing Address:

FEI Number: 50-0004556 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

LIVING HOPE IN. CHRIST OUT REACH MIN, INC.
615 S.E. MARTIN LUTHER KING BLVD.
HIGH SPRINGS, FL 32655 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:

Title: PD () Delete
Name: CANNADY, LARRY D
Address: POST OFFICE BOX 1611
City-St-Zip: ALACHUA, FL 32616

Title: VD () Delete
Name: CANNADY, CYNTHIA V
Address: POST OFFICE BOX 1611
City-St-Zip: ALACHUA, FL 32616

Title: D () Delete
Name: EDWARDS, MARNIQUE R
Address: P.O. BOX 181
City-St-Zip: ALACHUA, FL 32616

Title: M () Delete
Name: ROLLINS, ROBERT
Address: P.O. BOX 2481
City-St-Zip: HIGH SPRINGS, FL 32655

Title: M () Delete
Name: GUYDEU, SHEILA
Address: P.O. BOX 2481
City-St-Zip: HIGH SPRINGS, FL 32655

Title: M () Delete
Name: EDWARDS, TERANCULA
Address: P.O. BOX 181
City-St-Zip: ALACHULA, FL 32655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: LARRY CANNADY

PRES

05/06/2009

Electronic Signature of Signing Officer or Director

Date