

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2005 8:00 am
Secretary of State

03-15-2005 90024 010 ****70.00

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1. Entity Name

CHRIST OUTREACH MINISTRIES, INC.



Principal Place of Business

910 CALOOSAHATCHEE AVE
LABELLE FL 33975

Mailing Address

314 MCAUTHER BLVD.
LEHIGH FL 33936

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

314 McArthur Blvd

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

51-0430504

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required.

1st MOORE

CR2E037 (10/04)



6. Name and Address of Current Registered Agent

RUSS, JUDY A
314 MCAUTHER BLVD.
LEHIGH FL 33936

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME RUSS, BOOKER T
STREET ADDRESS 314 MCAUTHER BLVD.
CITY-ST-ZIP LEHIGH FL 33936

TITLE VD ☐ Delete
NAME RUSS, JUDY A
STREET ADDRESS 314 MCAUTHER BLVD.
CITY-ST-ZIP LEHIGH FL 33936

TITLE S ☐ Delete
NAME RUSS, PHYLLIS
STREET ADDRESS 2014 LOTUS RD.
CITY-ST-ZIP FORT MYERS FL 33905

TITLE C ☐ Delete
NAME FRANCIS, LINDA
STREET ADDRESS 2610 CHARLESTON PARK DRIVE
CITY-ST-ZIP ALVA FL 33920

TITLE S ☐ Delete
NAME STACK, RENEE
STREET ADDRESS 2135 CRYSTAL DRIVE APT #47
CITY-ST-ZIP FORT MYERS FL 33907

TITLE ☐ Delete
NAME SMITH, SAMUEL
STREET ADDRESS 2580 CHARLESTON PARK DRIVE
CITY-ST-ZIP ALVA FL 33920

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 trustee 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 like empowered.

SIGNATURE: *Judy Russ* JUDY A RUSS VD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-05

Date

239-369-0131

Daytime Phone #