

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008255

FILED  
Mar 25, 2012  
Secretary of State

**Entity Name:** JAIL MINISTRIES & OUTREACHES, INC.

**Current Principal Place of Business:**

101 LISA ANN TRAIL  
PALATKA, FL 32178

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1014  
PALATKA, FL 32178

**New Mailing Address:**

FEI Number: 65-1162175

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILLIAMS, JAMES P  
101 LISA ANN TRAIL  
PALATKA, FL 32178 US

**Name and Address of New Registered Agent:**

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  
Name: WILLIAMS, JAMES P  
Address: 101 LISA ANN TRAIL  
City-St-Zip: PALATKA, FL 32177

Title: VT  
Name: CAMPBELL, CATHY  
Address: 104 RIVER OAK COURT  
City-St-Zip: EAST PALATKA, FL 32131

Title: T  
Name: TREMBLY, ROY  
Address: 194 YELVINGTON ROAD  
City-St-Zip: EAST PALATKA, FL 32131

I hereby 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 all other like empowered.

SIGNATURE: JAMES P WILLIAMS

PD

03/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date