

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008477

FILED
Apr 08, 2008
Secretary of State

Entity Name: LAST DAYS WORLD OUTREACH, INC.

Current Principal Place of Business:

14521 SUNNY WATERS LANE
DELRAY BEACH, FL 33484

New Principal Place of Business:

Current Mailing Address:

14521 SUNNY WATERS LANE
DELRAY BEACH, FL 33484

New Mailing Address:

FEI Number: 54-2084705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KURTZER, SEYMOUR
14521 SUNNY WATERS LANE
DELRAY BEACH, FL 33484 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 () Delete
Name: KURTZER, JEFFREY A
Address: 14521 SUNNY WATERS LANE
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: GIAMO, JOHN
Address: 9538 US HWY #441
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: KURTZER, SEYMORE
Address: 14521 SUNNY WATERS LANE
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: KURTZER, LITA
Address: 14521 SUNNY WATERS LANE
City-St-Zip: DELRAY BEACH, FL 33484

Title: MR () Delete
Name: ANNORENO, ROBERT
Address: 4401 COCO PLUM WAY
City-St-Zip: DELRAY BEACH, FL 33345

Title: MR () Delete
Name: GORRIN, JOHN
Address: 8538 HWY 441
City-St-Zip: BOYNTON BEACH, FL 33437

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: SEYMOUR KURTZER

V.P.

04/08/2008

Electronic Signature of Signing Officer or Director

Date