

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 20, 2009
Secretary of State

DOCUMENT# N03000002542

Entity Name: NEW DIMENSIONS OUTREACH MINISTRIES, INC.**Current Principal Place of Business:**6175 NW 167 ST
STE G-14
MIAMI, FL 33015**New Principal Place of Business:****Current Mailing Address:**6175 NW 167 ST
STE G-14
MIAMI, FL 33015**New Mailing Address:****FEI Number:** 02-0684486**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HOSEA, PEGGY
1050 NW 155TH LANE
101
MIAMI, FL 33169 US**Name and Address of New Registered Agent:**NEW DDIMENSIONS OURTEACH MINISTRIES
6175 NW 167 STREET
G-14
MIAMI, FL 33015 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: E. J. MCKENZIE

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCKENZIE, EMANUEL J
Address: 1967 SW 94TH AVE
City-St-Zip: MIRAMAR, FL 33025

Title: PD () Delete
Name: MCKENZIE, KATHY L
Address: 1967 SW 94TH AVE
City-St-Zip: MIRAMAR, FL 33025

Title: CHD () Delete
Name: JOHNSON, HENRY
Address: 891 NW 213 TERR, APT 207
City-St-Zip: N MIAMI, FL 33169

Title: S () Delete
Name: LEWIS, RHONDA
Address: 10905 SW 177 TERR
City-St-Zip: MIAMI, FL 33156

Title: T () Delete
Name: HOSEA, PEGGY
Address: 1050 NW 155TH LANE # 101
City-St-Zip: MIAMI, FL 33169

Title: CH () Delete
Name: FRANCOIS, LIZCA
Address: 4435 SW 24TH ST
City-St-Zip: HOLLYWOOD, FL 33023

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: E J. MCKENZIE

D

03/20/2009

Electronic Signature of Signing Officer or Director

Date