

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 07, 2006 08:00 AM
Secretary of State

DOCUMENT # N03000005324

1. Entity Name
STRAITWAY OUTREACH MINISTRIES, INC.



Principal Place of Business
6807 OAKMONT
NORTH LAUDERDALE, FL 33068

Mailing Address
6807 OAKMONT
NORTH LAUDERDALE, FL 33068



08212006 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
57-1171958

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAMPKIN, VICTORIA L
6807 OAKMONT
NORTH LAUDERDALE, FL 33068

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IN THIS SPACE**

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

U00000576453
09/07/06-80007-009 150.00

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LAMPKIN, JEFFREY
STREET ADDRESS 6807 OAKMONT
CITY-ST-ZIP NORTH LAUDERDALE, FL 33068

TITLE MD
NAME LAMPKIN, VICTORIA L
STREET ADDRESS 6807 OAKMONT
CITY-ST-ZIP NORTH LAUDERDALE, FL 33068

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pres.

8-30-06

Date

Daytime Phone #