

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005324

FILED
Apr 29, 2009
Secretary of State

Entity Name: STRAITWAY OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

1983 NW 55 AVE
BLDG. K
MARGATE, FL 33063

New Principal Place of Business:

1935 BANKS RD.
MARGATE, FL 33063 US

Current Mailing Address:

1983 NW 55 AVE
BLDG. K
MARGATE, FL 33063

New Mailing Address:

1935 BANKS RD.
MARGATE, FL 33063 US

FEI Number: 57-1171958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMPKIN, VICTORIA L
1983 NW 55 AVE
BLDG. K
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

LAMPKIN, VICTORIA L
1935 BANKS RD.
MARGATE, FL 33063 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: VICTORIA L. LAMPKIN

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAMPKIN, JEFFREY
Address: 1983 NW 55 AVE BLDG. K
City-St-Zip: MARGATE, FL 33063

Title: MD () Delete
Name: LAMPKIN, VICTORIA L
Address: 1983 NW 55 AVE BLDG. K
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAMPKIN, JEFFREY
Address: 1935 BANKS RD.
City-St-Zip: MARGATE, FL 33063 US

Title: MD (X) Change () Addition
Name: LAMPKIN, VICTORIA L
Address: 1935 BANKS RD.
City-St-Zip: MARGATE, FL 33063 US

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: VICTORIA L. LAMPKIN

MD

04/29/2009

Electronic Signature of Signing Officer or Director

Date