

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 07, 2005  
Secretary of State**

DOCUMENT# N03000006428

Entity Name: POWER OUTREACH MINISTRIES OF THE APOSTOLIC FAITH, INC.

**Current Principal Place of Business:**

5530 SW 10TH COURT  
MARGATE, FL 33068

**New Principal Place of Business:**

**Current Mailing Address:**

5530 SW 10TH COURT  
MARGATE, FL 33068

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

GAYLE, WARREN  
5530 SW 10TH COURT  
MARGATE, FL 33068 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: D ( ) Delete  
Name: GAYLE, WARREN  
Address: 5530 SW 10TH COURT  
City-St-Zip: MARGATE, FL 33068
- Title: D ( ) Delete  
Name: GAYLE, LORNA  
Address: 5530 SW 10TH COURT  
City-St-Zip: MARGATE, FL 33068
- Title: D ( ) Delete  
Name: FISHER, ANNETTE M  
Address: 1843 SW 63RD AVE  
City-St-Zip: POMPANO BEACH, FL 33068
- Title: D ( ) Delete  
Name: WATTS, VALDA M  
Address: 2937 NW 17TH STREET  
City-St-Zip: FT LAUDERDAL, FL 33311
- Title: D ( ) Delete  
Name: ROSE, IONE  
Address: 16200 SW 49TH COURT  
City-St-Zip: MIRAMAR, FL 33027
- Title: D ( ) Delete  
Name: EDMAN, EDNEY  
Address: 843 NW 79TH TERRACE  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

- Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:
- Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:
- Title: D (X) Change ( ) Addition  
Name: ELLIOTT, CLAUDIA J  
Address: 4711 NW 41 CT  
City-St-Zip: LAUDERDALE LAKES, FL 33319
- 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 for the exemption stated in Section 119.07(3)(i), 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: CLAUDIA ELLIOTT

SECR

04/07/2005

Electronic Signature of Signing Officer or Director

Date