

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007260

FILED
May 01, 2005
Secretary of State

Entity Name: OUTSIDE THE WALLS MINISTRIES, INC

Current Principal Place of Business:

129 NW 3RD AVE
DELRAY BEACH, FL 33444 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1467
DELRAY BEACH, FL 33447 US

New Mailing Address:

777 EAST ATLANTIC AVE
SUITE C2 PMB #164
DELRAY BEACH, FL 33483 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRIFFIN, WILLIAM N JR.
129 NW 3RD AVE
DELRAY BEACH, FL 33444 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: P () Delete
Name: GRIFFIN, WILLIAM N JR.
Address: 129 NW 3RD AVE
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: VP () Delete
Name: GRIFFIN, TONYA T
Address: 129 NW 3RD AVE
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: VP (X) Delete
Name: JOHNSON, SHIRLEY L
Address: 303 NE 187TH ST,
City-St-Zip: MIAMI, FL 33179 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: WAUGH, NEIL
Address: PO BOX 19406
City-St-Zip: PLANATION, FL 33318 US

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: WILLIAM N. GRIFFIN, JR

PRES

05/01/2005

Electronic Signature of Signing Officer or Director

Date