

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Feb 01, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N03000007324**

1. Entity Name

CHRISTIAN MANOR OUTREACH MINISTRY, INC.



Principal Place of Business

11344 AVENIDA AUGUSTA  
CLERMONT FL 34711

Mailing Address

11344 AVENIDA AUGUSTA  
CLERMONT FL 34711



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

75-3127720

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LYNCH, ESTELLE  
11344 AVENIDA AUGUSTA  
CLERMONT FL 34711

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 if not applicable.

(NOTE: Registered Agent signature required when re-stating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME P  
STREET ADDRESS LYNCH, ESTELLE  
CITY-ST-ZIP 11344 AVENIDA AUGUSTA  
CLERMONT FL 34711

TITLE ☐ Delete  
NAME V  
STREET ADDRESS JOHNSON, ERNEST A JR.  
CITY-ST-ZIP 2941 PEMBRIDGE  
CELEBRATION FL 34747

TITLE ☐ Delete  
NAME T  
STREET ADDRESS LYNCH, THOMAS  
CITY-ST-ZIP 11344 AVENIDA AUGUSTA  
CLERMONT FL 34711

TITLE ☐ Delete  
NAME S  
STREET ADDRESS THOMAS, ANGELIA  
CITY-ST-ZIP 1408 CAREY GLENN LANE  
ORLANDO FL 32824

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP U00000812041  
02/12/08-80031-002 61.25

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: ESTELLE LYNCH**

1/29/08 (352) 494-0339