2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N03000007938

Entity Name: WOMEN CHOSEN FOR THE PURPOSE OF GOD OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

2605 N. 7TH AVENUE
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

2605 N. 7TH AVENUE
PENSACOLA, FL 32503

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:

LINDSEY, VICTORIA
2605 N. 7TH AVENUE
PENSACOLA, FL 32503 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:	LINDSEY, VICTORIA W	
Address:	2605 N. 7TH AVENUE	
City-St-Zip:	PENSACOLA, FL 32503	
Title:	D	( ) Delete
Name:	MCCARTY, TANGIE M	
Address:	1014 WEST FISHER STREET	
City-St-Zip:	PENSACOLA, FL 32501	
Title:	DD	( ) Delete
Name:	NICHOLSON, ZENOBIA M	
Address:	7861 UNTREINER AVENUE	
City-St-Zip:	PENSACOLA, FL 32534	
Title:	D	( ) Delete
Name:	MILLS, LOLA I	
Address:	3 GENTIAN DRIVE	
City-St-Zip:	PENSACOLA, FL 32503	
Title:	D	( ) Delete
Name:	JACKSON, MARIE	
Address:	109 LAKEWOOD RD	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	D	( ) Delete
Name:	JAUDON, DOROTHY	
Address:	1514 NORTH DR MARTINL KING DR	
City-St-Zip:	PENSACOLA, FL 32503	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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 LINDSEY PRES 04/30/2007
Electronic Signature of Signing Officer or Director — Date