## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Aug 24, 2006 8:00 am Secretary of State

DOCUMENT # N0300008346  1. Entity Name SISTERHOOD OUTREACH MINISTRY, INC.								0	8-24-2006 9	0063 050	) ****61	.25
Principal Place of Business 2306 NW 24TH RD 0CALA, FL 34475				Mailing Address 2306 NW 24TH RD OCALA, FL 34475				40101801				
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				08162006 C	hg-NP	CR2E03	37 (4/06)	
City & State				City & State			4. FEI Number 20-0347843			Applied For Not Applicable		
Zip				Zip	Cou	Country		5. Certificate of S			8.75 Add ee Require	
	Current Regis		Name		7. Name and Ad	dress of New R	egistered A	gent				
FAISON, ALICE MAE 2306 NW 24TH RD						Street Address (P.O. Box Number is Not Acceptable)						
OCALA, FL 34475							× 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
				City				FL	Zip Cod	le		
	ions of register	ed agent	tement for the p	urpose of changing its  f applicable. (NOTE				red agent, or both, in	n the State of Fid	orida. I am fa	ımiliar with,	and accept
Filing Fee is \$61.25 9. Election Campa  Due by September 6, 2006 Trust Fund Cont								\$5.00 May Be Added to Fees	Flor	lake check ida Departi	ment of S	tate
10.	1	OFFICERS	AND DIRECTO		11.	_	, , , , , , , , , , , , , , , , , , ,	ADDITIONS/CHANG				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FAISON, AI 2366 NW 24 OCALA, FL	4TH RD		☐ Delete		•	Je 88	on Mc Mol Hun Mpa, F	Tyer les Le 3364	rke [] 7-28	Change	Accition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SERMON, 0 2106 SW 7 OCALA, FL	TH ST		☐ Delete				,			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	LONG, MAR' TH STREET 34471		☐ Delete					,		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1 ,	NG, EDWIN TH STREET 34471		Delete						-	Change	· Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FAISON, RI 2306 NW 2- OCALA, FL	4TH ROAD	Jean 8801 Dr. 10m	Mc TVer Hunt Lake po Fl. 33647							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST FAISON, TI 2306 NW 2 OCALA, FL	4TH ROAD		☐ Delete							Change	☐ Addition
indicated of the cor	l on this report rporation or the	or supplements receivecor tru	al report is true : stee empowere	iling does not qualify for and accurate and that n d to execute this report I other like empowered	ny signa as requi	ture shall h	nave the	same legal effect a: 7, Florida Statutes; a	s if made under	oath; that I ar ie appears in	m an office Block 10 c	r or director

Alice Mae Faison

SIGNATURE:

Duck (NO3000008346) 8-12-09 ATJACHMENT 40101801 To Whom It May Consen; Doc# Please soud out necessary NO3000008346 forms that I need to sign. my check was returned by you, some how it was misplaced, planse send me The 50130 forms, I Deed to meet the dead less. I've been beling for three years and nove had to Sign forms. Some of The directors were deletel I Son't centerotord, Thank you for your cenderstanding only speedy response. Thanks, Joues