

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000341

FILED
Apr 29, 2009
Secretary of State

Entity Name: WOMEN ON A MISSION OUTREACH MINISTRIES INC.

Current Principal Place of Business:

5460 NORTH ST RD 7, STE 218
FT LAUDERDALE, FL 33319

New Principal Place of Business:

5460 NORTH ST RD 7
SUITE 224
FT LAUDERDALE, FL 33319

Current Mailing Address:

P O BOX 938744
MARGATE, FL 33093

New Mailing Address:

FEI Number: 71-0958895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BISHOP, GILLIAN PASTOR
11113 NW 38 PL
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

BISHOP, GILLIAN DR
11113 NW 38 PL
SUNRISE, FL 33351 US

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: DR. GILLIAN BISHOP

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BISHOP, GILLIAN PASTOR
Address: 11113 NW 38 PL
City-St-Zip: SUNRISE, FL 33351

Title: SD () Delete
Name: BROWN, ABIGAIL
Address: 2331 N STATE ROAD 7, SUITE #208
City-St-Zip: LAUDERHILL, FL 33313

Title: AD () Delete
Name: MCLEOD, ELIKA
Address: 5927 PIERCE
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: BISHOP, EVERETT PASTOR
Address: 11113 NW 38TH PLACE
City-St-Zip: SUNRISE, FL 33351

Title: D () Delete
Name: CURRIE, ROSEMARIE
Address: 9213 NW 45TH STREET
City-St-Zip: SUNRISE, FL 33351

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: GOODEN, TANIA A
Address: 6856 NW 32ND STREET
City-St-Zip: MARGATE, FL 33063 US

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: TAG

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date