

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001035

FILED
Apr 26, 2007
Secretary of State

Entity Name: OUT OF THE FIRE MINISTRIES INC.

Current Principal Place of Business:

622 ORCHARD BROOK ROAD
GAINESVILLE, GA 30504

New Principal Place of Business:

2703 HUNTER RIDGE LANE
NORCROSS, GA 33092

Current Mailing Address:

P. O. BOX 343374
FLORIDA CITY, FL 33034

New Mailing Address:

FEI Number: 14-1902627 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AHRENS, FLORENCE
16900 SW 277 STREET
HOMESTEAD, FL 33031 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: PD () Delete
Name: PASSMORE, MIRIAM
Address: 622 ORCHARD BROOK ROAD
City-St-Zip: GAINESVILLE, GA 30504

Title: VD () Delete
Name: AHRENS, FLORENCE
Address: 16900 SW 277 STREET
City-St-Zip: HOMESTEAD, FL 33031

Title: STD () Delete
Name: STEVENSON, CHERYL A
Address: 2151 N KROME AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Delete
Name: RUTLEDGE, KIMBERLY
Address: P. O. BOX 19294
City-St-Zip: BIRMINGHAM, AL 35219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PASSMORE, MIRIAM
Address: 2203 HUNTER RIDGE LANE
City-St-Zip: NORCROSS, GA 30092

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

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

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: FLORENCE AHRENS

VD

04/26/2007

Electronic Signature of Signing Officer or Director

Date