2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N04000001861

Entity Name: GIBSON SYLVESTRE GLOBAL OUTREACH INC.

Current Principal Place of Business:

6831 N.W. 6TH ST.
MARGATE, FL 33063 US

New Principal Place of Business:

6831 N.W. 61ST STREET
MARGATE, FL 33063 US

Current Mailing Address:

P.O. BOX 934741
MARGATE, FL 33093 US

New Mailing Address:

FEI Number: 65-1222097 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SYLVESTRE, GIBSON
6831 N.W. 6TH ST.
MARGATE, FL 33063 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: P ( ) Delete
Name: SYLVESTRE, GIBSON
Address: 6831 N.W. 6TH STREET
City-St-Zip: MARGATE, FL 33063 US

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SYLVESTRE, GIBSON
Address: P.O. BOX 934741
City-St-Zip: MARGATE, FL 33093 US

Title: D ( ) Change (X) Addition
Name: MOORE, JENNIFER
Address: P.O. BOX 934741
City-St-Zip: MARGATE, FL 33093 US

Title: D ( ) Change (X) Addition
Name: COLEMAN, NORM
Address: P.O. BOX 934741
City-St-Zip: MARGATE, FL 33093 US

Title: D ( ) Change (X) Addition
Name: OUELLETTE, RAY
Address: P.O. BOX 934741
City-St-Zip: MARGATE, FL 33093 FL

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: GIBSON SYLVESTRE P 04/30/2009

Electronic Signature of Signing Officer or Director — Date