2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 28, 2005
Secretary of State

DOCUMENT# N04000007404

Entity Name: FAITH WORKS OUTREACH MINISTRIES, INC

Current Principal Place of Business:

7034 MINIPPI DR
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

7034 MINIPPI DR
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 01-0731643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TYSON, PHYLLIS
7034 MINIPPI DR
ORLANDO, FL 32818 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: TYSON, PHYLLIS
Address: 7034 MINIPPI DR
City-St-Zip: ORLANDO, FL 32818

Title: VP ( ) Delete
Name: PARKS, TANGULA
Address: 1317 CHARLES CT
City-St-Zip: STARKE, FL 32091

Title: S ( ) Delete
Name: JONES, YVONEE
Address: 3452 GAY LILLY LN
City-St-Zip: TALLAHASSEE, FL 32308

Title: T ( ) Delete
Name: DAVIS, DELROY
Address: P.O. BOX 2285
City-St-Zip: ORLANDO, FL 32810

Title: T ( ) Delete
Name: MARTIN, JESSICA
Address: 3114 HOUNDSWORTH CT
City-St-Zip: ORLANDO, FL 32837

Title: T ( ) Delete
Name: GAYLE, MICHAEL DR.
Address: 1214 WATER DR
City-St-Zip: WINTER PARK, FL 32789

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 for the exemption stated in Section 119.07(3)(i), 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: PHYLLIS W. TYSON P 08/28/2005

Electronic Signature of Signing Officer or Director — Date