

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008875

FILED
Apr 23, 2009
Secretary of State

Entity Name: SEVENTHDAY CHURCH OF GOD OUTREACH MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

712 ANDERSON STREET
MASCOTTE, FL 34753 US

New Principal Place of Business:

4213 N. PINE HILLS ROAD
ORLANDO, FL 32808 US

Current Mailing Address:

P.O. BOX 580606
ORLANDO, FL 32858 US

New Mailing Address:

FEI Number: 30-0294823 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SEWELL, SELVYN M
1072 SINGLETON CIRCLE
GROVELAND, FL 34736 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: PRES () Delete
Name: SEWELL, SELVYN M
Address: 1072 SINGLETON CIRCLE
City-St-Zip: GROVELAND, FL 34736 US

Title: V.P. () Delete
Name: ROWE, OWEN
Address: 4802 BASSWOOD LANE
City-St-Zip: ORLANDO, FL 32808 US

Title: SEC. () Delete
Name: HAYLES, PAULETTE D
Address: 408 W. DELAVAN AVENUE,
City-St-Zip: BUFFALO, NY 14213 US

Title: A/SE () Delete
Name: WILLIAMSON, DONNAE
Address: 9525 WATER ORCHID AVE.
City-St-Zip: CLERMONT, FL 34711 US

Title: TREA () Delete
Name: MODESTE, PHILIP M
Address: 1211 WINDY MEADOW DRIVE,
City-St-Zip: CLAREMONT, FL 34711 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC. (X) Change () Addition
Name: HAYLES, PAULETTE D
Address: 394 W. DELAVAN AVENUE,
City-St-Zip: BUFFALO, NY 14213 US

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

Title: TREA (X) Change () Addition
Name: GAYLE, LINDEN
Address: 480 ROB ROY DRIVE,
City-St-Zip: CLAREMONT, FL 34711 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: SELVYN M. SEWELL

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

Date