

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009342

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** BEYOND THE WALLS OUTREACH MINISTRIES, INC.

**Current Principal Place of Business:**

664 68TH AVE SOUTH  
ST PETERSBURG, FL 33705

**New Principal Place of Business:**

**Current Mailing Address:**

664 68TH AVE SOUTH  
ST PETERSBURG, FL 33705

**New Mailing Address:**

**FEI Number:** 20-1699716

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WITHERSPOON, IVETHA  
664 68TH AVE SOUTH  
ST PETERSBURG, FL 33705 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: WITHERSPOON, IVETHA  
Address: 664 68TH AVE SOUTH  
City-St-Zip: ST PETERSBURG, FL 33705

Title: V ( ) Delete  
Name: JONES, JARRISH  
Address: 10538 3RD ST N APT B  
City-St-Zip: ST PETERSBURG, FL 33716

Title: S ( ) Delete  
Name: ROSSI, BRENDA  
Address: 6011 PARIS WAY  
City-St-Zip: ELLENTON, FL 34222

Title: T ( ) Delete  
Name: ROSSI, BRENDA  
Address: 6011 PARIS WAY  
City-St-Zip: ELLENTON, FL 34222

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V (X) Change ( ) Addition  
Name: ROSSI, BRENDA  
Address: 6011 PARIS WAY  
City-St-Zip: ELLENTON, FL 34222

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 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: IVETHA WITHERSPOON

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date