

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 12, 2007**  
**Secretary of State**

DOCUMENT# N04000009837

**Entity Name:** TOP OF THE BOTTOM OUTREACH MINISTRIES, INC.**Current Principal Place of Business:**2924 MISSION RD.  
PENSACOLA, FL 325053917**New Principal Place of Business:**2924 MISSION RD.  
PENSACOLA, FL 32505**Current Mailing Address:**2933 MICHAEL DRIVE  
PENSACOLA, FL 325053917**New Mailing Address:**2924 MISSION RD  
PENSACOLA, FL 32505**FEI Number:** 59-3453724**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WILLIAMS, WILLIE  
2933 MICHAEL DRIVE  
PENSACOLA, FL 325053917 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:** D ( ) Delete  
**Name:** STRAUGHN, SUE  
**Address:** 4990 MOBILE HWY  
**City-St-Zip:** PENSACOLA, FL 32506**Title:** D ( ) Delete  
**Name:** BULLOCK, ELLIS W  
**Address:** 730 BAYFRONT PKWY  
**City-St-Zip:** PENSACOLA, FL 32501**Title:** D ( ) Delete  
**Name:** COLLIER, LACEY  
**Address:** 1 NORTH PALAFOX STREET  
**City-St-Zip:** PENSACOLA, FL 32501**Title:** D ( ) Delete  
**Name:** RAMOS, TAMELA  
**Address:** 11000 UNIVERSITY PKWY BLDG 53 RM 221  
**City-St-Zip:** PENSACOLA, FL**Title:** DT ( ) Delete  
**Name:** STARRATT, JOANN  
**Address:** 2662 SHERRILANE DRIVE  
**City-St-Zip:** CANTONMENT, FL 32533**Title:** D ( ) Delete  
**Name:** ODOM, C. WAYNE  
**Address:** 1725 EAGLE TERRACE  
**City-St-Zip:** CANTONMENT, FL 32533**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DP (X) Change ( ) Addition  
**Name:** WOOLLEN, DAVID PRES  
**Address:** 2820 W. FAIRFIELD DR  
**City-St-Zip:** PENSACOLA, FL 32505**Title:** DS (X) Change ( ) Addition  
**Name:** BOYD, CHARLES R SEC  
**Address:** 3278 LAS BRISAS DR  
**City-St-Zip:** PENSACOLA, FL 32526**Title:** DVP (X) Change ( ) Addition  
**Name:** NELL, CHARLES A V. PRES  
**Address:** 311 MARABELLE DR  
**City-St-Zip:** PENSACOLA, FL 32514**Title:** DT (X) Change ( ) Addition  
**Name:** BANKS, SHARON E TREASUR  
**Address:** 813 LADNER DR  
**City-St-Zip:** PENSACOLA, FL 32505**Title:** D (X) Change ( ) Addition  
**Name:** MULLEN, REBECCA BUS.MGR  
**Address:** 2356 AMELIA LANE  
**City-St-Zip:** PENSACOLA, FL 32526**Title:** O (X) Change ( ) Addition  
**Name:** WILLIAMS, MARY P ADMIN O  
**Address:** 2933 MICHAEL DR  
**City-St-Zip:** PENSACOLA, FL 32505

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: WILLIE WILLIAMS

CEO

09/12/2007

Electronic Signature of Signing Officer or Director

Date