

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000195

FILED
Jul 11, 2008
Secretary of State

Entity Name: UNION OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

19200 NORTHWEST 6TH COURT
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

19200 NORTHWEST 6TH COURT
MIAMI, FL 33169

New Mailing Address:

FEI Number: 04-3642136 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

Name and Address of New Registered Agent:

GREENE, JOANN
19200 NW 6 COURT
MIAMI, FL 33169 US

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: DP () Delete
Name: GREENE, WILLIE C
Address: 19200 NORTHWEST 6TH COURT
City-St-Zip: MIAMI, FL 33169

Title: VP () Delete
Name: GREENE, JOANN
Address: 19200 NORTHWEST 6TH COURT
City-St-Zip: MIAMI, FL 33169

Title: S () Delete
Name: JACKSON, JESSICA
Address: 18820 NW 41ST AVE.
City-St-Zip: MIAMI, FL 33055

Title: T () Delete
Name: ALEXANDER, JOSEPH
Address: 7668 NW 6TH COURT
City-St-Zip: MIAMI, FL 33142

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:

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: JOANN GREENE

VP

07/11/2008

Electronic Signature of Signing Officer or Director

Date