

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000772

FILED
Mar 17, 2008
Secretary of State

Entity Name: COMMUNITY FAITH OUTREACH MINISTRIES, INCORPORATED

Current Principal Place of Business:

5832 CORSON PLACE
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

5832 CORSON PLACE
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 57-1194591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYNES, ROSHAUN
5832 CORSON PLACE
LAKE WORTH, FL 33463 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: PD () Delete
Name: JANSSEN, CLIFFORD DR
Address: 1114 N. OLIVE AVENUE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD () Delete
Name: JOHNSON, CYNTHIA
Address: 212D FOXTAIL DRIVE
City-St-Zip: WEST PALM BEACH, FL 33405

Title: TD () Delete
Name: KENNEDY, WANDA
Address: 3360 DAVIE BLVD
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: CONEY, DEBRA
Address: 5832 CORSON PL
City-St-Zip: LAKE WORTH, FL 33463

Title: TD (X) Change () Addition
Name: MCMILLAN, CARRIE
Address: 4141 NW 26TH STREET
City-St-Zip: LAUDERHILL, FL 33313

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: CARRIE MCMILLAN

TD

03/17/2008

Electronic Signature of Signing Officer or Director

Date