

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002031

FILED  
Mar 22, 2007  
Secretary of State

**Entity Name:** COMMUNITY OUTREACH MINISTRIES, INC.

**Current Principal Place of Business:**

2315 TRUMAN AVE  
PENSACOLA, FL 32505

**New Principal Place of Business:**

**Current Mailing Address:**

2315 TRUMAN AVE  
PENSACOLA, FL 32505

**New Mailing Address:**

**FEI Number:** 51-0529618

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JOHNSON, ROBERT  
1636 KINSALE DR  
CANTONMENT, FL 32533 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: C ( ) Delete  
Name: JOHNSON, MYRTLE  
Address: 1636 KINSALE DR  
City-St-Zip: CANTONMENT, FL 32533

Title: D ( ) Delete  
Name: CUNNINGHAM, ROBERT  
Address: 314-A S CHAST STREET  
City-St-Zip: PENSACOLA, FL 32501

Title: D ( ) Delete  
Name: WASHINGTON, GLADYS  
Address: 54 DRUID STREET  
City-St-Zip: PENSACOLA, FL 32507

Title: S ( ) Delete  
Name: STALLWORTH, MARVIN  
Address: 3305 1/2 W JACKSON STREET  
City-St-Zip: PENSACOLA, FL 32505

**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 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: MYRTLE JOHNSON

C

03/22/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date