2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004283

FILED Apr 24, 2008 Secretary of State

Entity Name: NATIONAL EVANGELISTIC UNION OUTREACH NETWORK, INC.

Current Principal Place of Business:		New Principal Place of Busi	New Principal Place of Business:	
2331 NW 1 APT. 112 MIAMI, FL	119TH STREET 33167			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
2331 NW ⁻ APT. 112 MIAMI, FL	119TH STREET 33167			
FEI Number:	FEI Number Applied For ()	FEI Number Not Applicable (X) Certi	ficate of Status Desired (X)	
Name and	Address of Current Registered Agent	: Name and Address of New F	Registered Agent:	
2331 NW 1	ISTIC UNION OUTREACH NETWORK, I 119TH STREET 33167 US	NC.		
	named entity submits this statement for t e of Florida.	he purpose of changing its registered office o	or registered agent, or both,	
SIGNATUF		A	Data	
	Electronic Signature of Registered	-	Date	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO C	OFFICERS AND DIRECTORS	
Γitle: Vame: Address:	P () Delete VIOLET WILLIAMS, 2331 NW 119TH	Name:	ge () Addition	
	MIAMI, FL 33167	Address: City-St-Zip:		
City-St-Zip: Fitle: Name: Address:		City-St-Zip:	ge () Addition	
City-St-Zip: Fitle: Vame: Address: City-St-Zip: Fitle: Vame: Address: City-St-Zip:	MIAMI, FL 33167 VP () Delete SHELTON WEST, 5023 S. HALLSDALE AVE.	City-St-Zip: Title: () Chang Name: Address: City-St-Zip:	ge () Addition ge () Addition	
City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	MIAMI, FL 33167 VP () Delete SHELTON WEST, 5023 S. HALLSDALE AVE. LOS ANGELES, CA 90062 CB () Delete LARRY JOHNSON, 137 EAST 4TH STREET	City-St-Zip: Title: () Change Name: Address: City-St-Zip: Title: () Change Name: Address: City-St-Zip:		
City-St-Zip: City-St-Zip:	MIAMI, FL 33167 VP () Delete SHELTON WEST, 5023 S. HALLSDALE AVE. LOS ANGELES, CA 90062 CB () Delete LARRY JOHNSON, 137 EAST 4TH STREET LEXINGTON, KY 40508 D () Delete DERRICK DOUGLAS, 18220 NW 31 AVE.	City-St-Zip: Title: () Change Name: Address: City-St-Zip: Title: () Change Name: Address: City-St-Zip: Title: () Change Name: Address: City-St-Zip:	ge () Addition	

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: VIOLET WILLIAMS PRES 04/24/2008