

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 01, 2006
Secretary of State**

DOCUMENT# N05000005000

Entity Name: NEW CHURCH OF CHRIST OUT REACH MINISTRY INC.

Current Principal Place of Business:

109 BEACH ST
109
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

109 BEACH ST
109
PALATKA, FL 32177

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

LINTON, A. RENAYE
1048 S. STATE RD 19
PALATKA, FL 32177 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: P () Delete
Name: WOODARD, KEITH
Address: 109 BEACH ST
City-St-Zip: PALATKA, FL 32177

Title: T () Delete
Name: LAWTON, JOSEPHINE
Address: 109 BEACH ST
City-St-Zip: PALATKA, FL 32177

Title: S () Delete
Name: WHITE, LASHONDA
Address: 316 N 11TH ST APT B
City-St-Zip: PALATKA, FL 32177

Title: C () Delete
Name: CROWLEY, LEROY
Address: 109 BEACH ST
City-St-Zip: PALATKA, FL 32177

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: KEITH WOODARD

P

05/01/2006

Electronic Signature of Signing Officer or Director

_____ Date