2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# N05000010198

Entity Name: MANNA MINISTRIES OUTREACH, INC.

Current Principal Place of Business:

4180 HWY 273
GRACEVILLE, FL 32440

New Principal Place of Business:

Current Mailing Address:

4180 HWY 273
GRACEVILLE, FL 32440

New Mailing Address:

FEI Number: 14-1939760 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRUNER, ANN
4180 HWY 273
GRACEVILLE, FL 32440 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: D ( ) Delete
Name: BRUNER, ANN
Address: 4180 HWY 273
City-St-Zip: GRACEVILLE, FL 32440

Title: D ( ) Delete
Name: SHERRER, JACK
Address: 2854 HWY. 27
City-St-Zip: ENTERPRISE, AL 36330

Title: D ( ) Delete
Name: BROOKS, QUIDA
Address: 5019 FLYNT DR.
City-St-Zip: MARIANNA, FL 32446

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: D ( ) Change (X) Addition
Name: ARMSTRONG, BENJAMIN S
Address: 200 PARKWEST CIRCLE, SUITE 2
City-St-Zip: DOTHAN, AL 36303

Title: D ( ) Change (X) Addition
Name: HARRIS, CARA L
Address: 4391 LEE ROAD
City-St-Zip: MARIANNA, FL 32448

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: BENJAMIN S ARMSTRONG D 03/27/2009

Electronic Signature of Signing Officer or Director — Date