

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001507

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** FAITH MISSION OUTREACH MINISTRIES INC.

**Current Principal Place of Business:**

8601 W. COMMERCIAL BLVD  
TAMARAC, FL 33351

**New Principal Place of Business:**

4505 NW 103 AVE  
SUNRISE, FL 33351

**Current Mailing Address:**

P.O. BOX 190273  
SUNRISE, FL 33319

**New Mailing Address:**

**FEI Number:** 20-4089503

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MC CALLA, VEDA PRES.  
6190 WOODLAND BLVD  
TAMARAC, FL 33319 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  
Name: MC CALLA, VEDA G PRES  
Address: 6190 WOODLAND BLVD  
City-St-Zip: TAMARAC, FL 33319

Title: VP  
Name: JOSEPH, HOWARD V/PRES  
Address: 11331 NW 40TH PLACE  
City-St-Zip: SUNRISE, FL 33323

Title: SEC.  
Name: SAMUELS, JACQUELINE M SEC  
Address: 9425 NW 42 STREET  
City-St-Zip: SUNRISE, FL 33351

Title: OFF  
Name: JOSEPHS, MARLENE OFF  
Address: 11331 NW 40TH PLACE  
City-St-Zip: SUNRISE, FL 33323

Title: OFF  
Name: NEIL-MORGAN, DEBBIE OFF  
Address: 9300 NW 67TH STREET  
City-St-Zip: TAMARAC, FL 33321

I hereby 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 all other like empowered.

SIGNATURE: VEDA MCCALLA

PRES

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date