2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003744

FILED Apr 20, 2007 Secretary of State

Entity Name: ANSWERING THE CALL OUTREACH MINSTRIES JACKSONVILLE, INC.

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
7511 CHAFFEE POINT ROAD JACKSONVILLE, FL 32221				5508 WESCONNECT BLVD JACKSONVILLE, FL 32244		
Current Mailing Address:			New Mai	New Mailing Address:		
	ORTH OKEFE N, GA 31537	ONOKEE DRIVE				
FEI Number	r: 42-1700343	FEI Number Applied For ()	FEI Number Not App	plicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name an	d Address (of New Registered Agent:	
COOPER- HAMPTON, KEVA 500 CHAFFEE ROAD LOT 184 JACKSONVILLE, FL 32221 US			5508 WES JACKSON	COOPER- HAMPTON, KEVA 5508 WESCONNECT BLVD JACKSONVILLE, FL 32244 US		
	e named entity e of Florida.	submits this statement for the	purpose of changing	its registere	ed office or registered agent, or both,	
SIGNATURE:				04/20/2007		
	Electro	nic Signature of Registered Ag	ent		Date	
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	COOPER - HA) Delete MPTON, KEVA PASTOR H OKEFENOKEE DRIVE . BA 31537	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	T (COOPER, WA 5577 ROBERT CALLAHAN, FI	TS ROAD	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	ADM (MAYERS, KIM 6736 HARLOV JACKSONVILL	V BLVD	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Vame: Address:	HAIRSTON, BI	ROAD LOT 184	Title: Name: Address: City-St-Zip:		() Change () Addition	
City-St-Zip:) Delete	Title: Name:	T COOPER,	()Change(X)Addition TERRIE	
City-St-Zip: Title: Name: Address: City-St-Zip:	(Address: City-St-Zip:		ERTS ROAD /ILLE, FL 322011	

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: KEVA COOPER- HAMPTON P 04/20/2007