

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003749

FILED
Apr 26, 2007
Secretary of State

Entity Name: PRISON OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

12651 WALSINGHAM RD
SUITE B
LARGO, FL 33774

New Principal Place of Business:

12501 ULMERTON RD.
SUITE 17
LARGO, FL 33774

Current Mailing Address:

P.O. BOX 808
INDIAN ROCKS BEACH, FL 33785

New Mailing Address:

FEI Number: 20-4652988

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROHRET, KARIN
12651 WALSINGHAM RD
SUITE B
LARGO, FL 33774 US

Name and Address of New Registered Agent:

SACKS, JAMI L
12501 ULMERTON RD
SUITE 17
LARGO, FL 33774 US

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: JAMI L. SACKS

04/26/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SACKS, JAMI L
Address: PO BOX 808
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: VP () Delete
Name: ROHRET, KARIN
Address: 12651 WALSINGHAM RD STE. B
City-St-Zip: LARGO, FL 33774

Title: S () Delete
Name: SACKS, JAMI L
Address: PO BOX 808
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: T () Delete
Name: ROHRET, KARIN
Address: 12651 WALSINGHAM RD STE. B
City-St-Zip: LARGO, FL 33774

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SACK, JAMI L
Address: PO BOX 808
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SACKS, JAMI L
Address: PO BOX 808
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: D () Change (X) Addition
Name: SACKS, JAMI L
Address: PO BOX 808
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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: JAMI L. SACKS

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date