

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 04, 2007 8:00 am**  
**Secretary of State**

05-04-2007 90068 039 \*\*\*\*61.25

DOCUMENT # N06000003765

1. Entity Name

EXTENDING HANDS FOR CHRIST OUTREACH  
MINISTRIES, INC.



Principal Place of Business

Mailing Address

643 W SOUTH ST  
ORLANDO FL 32805

643 W SOUTH ST  
ORLANDO FL 32805

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

34-206 2593

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JONES, KENNETH E  
4014 BERLIN CT  
ORLANDO FL 32822

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME JONES, BRENDA K  
STREET ADDRESS 4041 BERLIN ST  
CITY- ST- ZIP ORLANDO FL 32822

TITLE ☐ Change ☒ Addition  
NAME D- Director  
STREET ADDRESS MARIA A. Roche  
CITY- ST- ZIP 635 W. South St.  
ORLANDO, FL. 32805

TITLE VPD ☐ Delete  
NAME KENNETH EARL JONES  
STREET ADDRESS 4014 BERLIN CT  
CITY- ST- ZIP ORLANDO FL 32822

TITLE ☐ Change ☒ Addition  
NAME D- Director  
STREET ADDRESS DAVID PARKS  
CITY- ST- ZIP 635 W. South St.  
ORLANDO, FL. 32805

TITLE STD ☐ Delete  
NAME MCKINZY, LATOSHA R  
STREET ADDRESS 7501 FT DESOTO ST #1203  
CITY- ST- ZIP ORLANDO FL 32822

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenneth E Jones* Kenneth Earl Jones

4-23-07

Date

407-272-3287  
407-208-9731

Daytime Phone #