

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009221

FILED  
Jan 11, 2008  
Secretary of State

**Entity Name:** BROKEN VESSEL OUTREACH MINISTRIES, INTERNATIONAL, INC.

**Current Principal Place of Business:**

7400 POWERS AVE., APT. 602  
602  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

48 ETON COURT  
CHAMBERSBURG, PA 17201

**Current Mailing Address:**

P.O. BOX 56141  
JACKSONVILLE, FL 322416141

**New Mailing Address:**

P.O. BOX 1111  
CHAMBERSBURG, PA 17201

FEI Number: 20-8413394

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BLUE, DENISE J.  
7400 POWERS AVE., APT. 602  
JACKSONVILLE, FL 32217 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: BLUE, DENISE J.  
Address: 7400 POWERS AVE., APT. 602  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D ( ) Delete  
Name: COOK, CARL  
Address: P.O. BOX 541  
City-St-Zip: CHENEYVILLE, LA 71325

Title: D ( ) Delete  
Name: GOSHA, JOANNA  
Address: P.O. BOX 401  
City-St-Zip: CHENEYVILLE, LA 71325

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: WILLIAMS, DENISE J.  
Address: 48 ETON COURT  
City-St-Zip: CHAMBERSBURG, PA 17201

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

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

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: DENISE J. WILLIAMS

D

01/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date