

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000009422

FILED
Oct 06, 2009
Secretary of State

Entity Name: FULL GOSPEL CHURCH MINISTRY OUTREACH, INC.

Current Principal Place of Business:

162 N.E. LARGO PLACE
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

162 N.E. LARGO PLACE
LAKE CITY, FL 32055

New Mailing Address:

FEI Number: 38-3741397 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MCCRAY, BERNARD
162 N.E. LARGO PLACE
LAKE CITY, FL 32055 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: BERNARD MCCRAY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCCRAY, BERNARD
Address: 162 N.E. LARGO PLACE
City-St-Zip: LAKE CITY, FL 32055

Title: VPD () Delete
Name: MCCRAY, KELVIN
Address: 10400 DAVIS ROAD
City-St-Zip: TAMPA, FL 33637

Title: D () Delete
Name: WILLIAMS, KEVIN C
Address: 10112 N BROOKS STREET
City-St-Zip: TAMPA, FL 33612

Title: TD () Delete
Name: CHRISTOPHER, ATWAINE
Address: 3806 CARROLLWOOD PLACE CIRCLE #206
City-St-Zip: TAMPA, FL 33624

Title: SD () Delete
Name: DAWSON, SICCORA M
Address: 9108 TALINA LANE
City-St-Zip: TAMPA, FL 33637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: BERNARD MCCRAY

P

10/06/2009

Electronic Signature of Signing Officer or Director

Date