

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000013150

FILED
Apr 15, 2007
Secretary of State

Entity Name: D/PROGRAMMED OUTREACH MINISTRIES INCORPORATED

Current Principal Place of Business:

3025 LEON AVE.
SARASOTA, FL 34234

New Principal Place of Business:

Current Mailing Address:

3025 LEON AVE.
SARASOTA, FL 34234

New Mailing Address:

FEI Number: 20-8032858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAULK, JAMES L
3025 LEON AVE.
SARASOTA, FL 34234 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: PTD () Delete
Name: PAULK, JAMES L
Address: 3025 LEON AVE.
City-St-Zip: SARASOTA, FL 34234

Title: D () Delete
Name: RAYMOND, TIM
Address: 3980 IRONWILD CIRCLE #405
City-St-Zip: BRADENTON, FL 34209

Title: SD () Delete
Name: PAULK, SYLVIA J
Address: 3025 LEON AVE.
City-St-Zip: SARASOTA, FL 34234

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:

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: JAMES PAULK

CEO

04/15/2007

Electronic Signature of Signing Officer or Director

Date