

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003343

FILED
Apr 17, 2008
Secretary of State

Entity Name: WINGS AS EAGLES OUTREACH MINISTRY INC.

Current Principal Place of Business:

MANOTAK AVE
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 37794
JACKSONVILLE, FL 32236

New Mailing Address:

P.O. BOX 371
MARIETTA, GA 30061

FEI Number: 56-2650301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RUSSELL, DORIS PASTOR
MANOTOK AVE
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

RUSSELL, DORIS PASTOR
SASANQUA LN SW
MARIETTA, FL 30008 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: DORIS RUSSELL

04/17/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TRES () Delete
Name: HOWELL, ERAINNA TRES
Address: MANOTOK AVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: DIR () Delete
Name: RUSSELL, ROSE ADVI
Address: SASANQUA LN
City-St-Zip: MAIETTA, GA 30060

Title: DIR () Delete
Name: GOODSON, ROBIN ARM
Address: MUFFIN LN
City-St-Zip: JACKSONVILLE, FL 32210

Title: DIR () Delete
Name: DURHAM, LAHONDA MINS
Address: BEACH WAY
City-St-Zip: JACKSONVILLE, FL 32207

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DIR (X) Change () Addition
Name: RUSSELL, ROSE ADVI
Address: SASANQUA LN SW
City-St-Zip: MAIETTA, GA 30060

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

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

Title: DEA () Change (X) Addition
Name: TERRY, BOGERS
Address: ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32216

Title: DEA () Change (X) Addition
Name: ANDREW, RUSSELL
Address: SASANQUA LN
City-St-Zip: MARIETTA, GA 30008

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: DORIS RUSSELL

PAS

04/17/2008

Electronic Signature of Signing Officer or Director

Date