2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# N07000003494

Entity Name: HOUSE OF JUDAH-OUTREACH CENTER, INC.

Current Principal Place of Business:

1305 STATE ROAD 16
ST AUGUSTINE, FL 32084

New Principal Place of Business:

123 LINCOLN STREET
ST AUGUSTINE, FL 32084

Current Mailing Address:

1305 STATE ROAD 16
ST AUGUSTINE, FL 32084

New Mailing Address:

123 LINCOLN STREET
ST AUGUSTINE, FL 32084

FEI Number: 59-2656463 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANKINS, TIMOTHY L
123 LINCOLN STREET
ST. AUGUSTINE, FL 32084 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: P ( ) Delete
Name: HANKINS, CATHY
Address: 123 LINCOLN ST
City-St-Zip: ST AUGUSTINE, FL 32084

Title: V ( ) Delete
Name: COLEY, SHARYN
Address: 179 M.L. KING AVE
City-St-Zip: ST AUGUSTINE, FL 32984

Title: S ( ) Delete
Name: JOHNSON, CARLA
Address: 236 HOLMES BLVD
City-St-Zip: ST AUGUSTINE, FL 32084

Title: T ( ) Delete
Name: HANKINS, NATHANIEL
Address: 123 LINCOLN ST
City-St-Zip: ST AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: HANKINS, NATHANIEL
Address: 123 LINCOLN STREET
City-St-Zip: ST AUGUSTINE, FL 32984

Title: S (X) Change ( ) Addition
Name: JACKSON, CLAUDIE
Address: 126 LINCOLN STREET
City-St-Zip: ST AUGUSTINE, FL 32084

Title: T (X) Change ( ) Addition
Name: FRAZIER, LINDA
Address: 75 LEE STREET
City-St-Zip: ST AUGUSTINE, FL 32084

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: CATHY HANKINS P 04/28/2008
Electronic Signature of Signing Officer or Director — Date