2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N07000003494

TI FILED
Sep 03, 2008
Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

123 LINCOLN STREET ST AUGUSTINE, FL 32084

Current Mailing Address: 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: Name and Address of New Registered Agent:

HANKINS, TIMOTHY L

123 LINCOLN STREET

ST. AUGUSTINE, FL 32084 US

AUSTIN, DELLA R

2918 NORTH 9TH STREET

ST. AUGUSTINE, FL 32084 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: DELLA REESE AUSTIN 09/03/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition Name: HANKINS, CATHY Name:

Address: 123 LINCOLN ST Address: City-St-Zip: ST AUGUSTINE, FL 32084 City-St-Zip:

Title: V () Delete Title: V (X) Change () Addition Name: HANKINS, NATHANIEL Name: DANIELS, CHRISTINE

Address: 123 LINCOLN STREET Address: 764 SOUTH HERITAGE CREEK WAY
City-St-Zip: ST AUGUSTINE, FL 32984 City-St-Zip: ST AUGUSTINE, FL 32084

Title: S () Delete Title: S (X) Change () Addition Name: JACKSON, CLAUDIE Name: FRAZIER, LINDA

 Address:
 126 LINCOLN STREET
 Address:
 975 LEE STREET

 City-St-Zip:
 ST AUGUSTINE, FL 32084
 City-St-Zip:
 ST AUGUSTINE, FL 32084

Title: T () Delete Title: T (X) Change () Addition

 Name:
 FRAZIER, LINDA
 Name:
 HANKINS, NATHANIEL

 Address:
 75 LEE STREET
 Address:
 123 LINCOLN STREET

 City-St-Zip:
 ST AUGUSTINE, FL 32084
 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 MRS. 09/03/2008