

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 03, 2009
Secretary of State**

DOCUMENT# N07000003494

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

Current Principal Place of Business:

123 LINCOLN STREET
ST AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

123 LINCOLN STREET
ST AUGUSTINE, FL 32084

New Mailing Address:

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

Name and Address of Current Registered Agent:

AUSTIN, DELLA R
2918 NORTH 9TH 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: DANIELS, CHRISTINE
Address: 764 SOUTH HERITAGE CREEK WAY
City-St-Zip: ST AUGUSTINE, FL 32084

Title: S () Delete
Name: FRAZIER, LINDA
Address: 975 LEE STREET
City-St-Zip: ST AUGUSTINE, FL 32084

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

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:

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

D

03/03/2009

Electronic Signature of Signing Officer or Director

_____ Date