2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# N07000005114

Entity Name: JESUS LOVES YOU OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

6111 LOST TREE COURT
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

6111 LOST TREE COURT
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 06-1814176 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KING, ROSE MARIE
5319 RABBIT RIDGE TRAIL
ORLANDO, FL 32818 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:	JACKSON, PAULINE RENEA	
Address:	6111 LOST TREE COURT	
City-St-Zip:	ORLANDO, FL 32808	
Title:	D	( ) Delete
Name:	KING, ROSE MARIE	
Address:	5319 RABBIT RIDGE TRAIL	
City-St-Zip:	ORLANDO, FL 32818	
Title:	S	( ) Delete
Name:	DANIEL, SHANTEL	
Address:	6817 ALTA WESTGATE DRIVE	
City-St-Zip:	ORLANDO, FL 32818	
Title:	D	( ) Delete
Name:	ALEXANDER, SENICA L	
Address:	6111 LOST TREE COURT	
City-St-Zip:	ORLANDO, FL 32808	
Title:	T	( ) Delete
Name:	ALEXANDER, TORY A	
Address:	6111 LOST TREE COURT	
City-St-Zip:	ORLANDO, FL 32808	
Title:	ED	( ) Delete
Name:	HOPE, JOYCE	
Address:	3012 WOODRIDGE COURT	
City-St-Zip:	ALBANY, GA	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	KING, ROSE MARIE	
Address:	2516 WILD ROSE CT	
City-St-Zip:	ARLINGTON, TX 76006	
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: PAULINE R JACKSON P 04/07/2009

Electronic Signature of Signing Officer or Director — Date