## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000012045

FILED Apr 29, 2009 Secretary of State

Entity Nar	ne: EVERLAST	ING BRANCH OUTREACH	CENTER OF JESUS CHRIST INC.		
Current Principal Place of Business:			New Principal Place of B	New Principal Place of Business:	
	METTO AVE. ERS, FL 33916	US	3314 APACHE STREET FORT MYERS, FL 33916	US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
P.O. BOX FORT MYE	50442 ERS, FL 33994	US	P.O. BOX 51027 FORT MYERS, FL 33994	US	
FEI Number:	38-3777500	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of Ne	Name and Address of New Registered Agent:	
3314 APA( FORT MYE	E, VONCILE W CHE STREET ERS, FL 33916	US  bmits this statement for the r	ourpose of changing its registered offi	ce or registered agent, or both	
	of Florida.	211110 1110 0111101101101101101	van pooce of changing ne regions out on	oo o, rogiotorou agem, or zour,	
SIGNATUF	RE:				
	Electronic	Signature of Registered Age	ent	Date	
OFFICERS	S AND DIRECTO	ORS:	ADDITIONS/CHANGES T	O OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () C RADCLIFFE, CAR 3314 APACHE ST FORT MYERS, F	REET	Title: ( ) C Name: Address: City-St-Zip:	change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPSD () C RADCLIFFE, VON 3314 APACHE ST FORT MYERS, FI	REET	Title: ( ) C Name: Address: City-St-Zip:	change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD () C WHITE, TINA 1960 PAULDO ST FORT MYERS, FI		Title: () C Name: Address: City-St-Zip:	change ( ) Addition	

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: VONCILE W. RADCLIFFE RΑ 04/29/2009