

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001622

FILED
Jan 06, 2009
Secretary of State

Entity Name: CHRIST'S S.O.S OUTREACH, INC.

Current Principal Place of Business:

17348 NE 39TH COURT
CITRA, FL 32113

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1167
CITRA, FL 32113

New Mailing Address:

FEI Number: 26-1951381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIDAL, ROSANGELA M
17348 NE 39TH COURT
CITRA, FL 32113 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: D () Delete
Name: GOLD, KAREN
Address: 303 SE 17TH AVE, STE 309-184
City-St-Zip: OCALA, FL 34471

Title: V () Delete
Name: SPAETH, MARC D
Address: 7643 S.W. 78TH ST
City-St-Zip: OCALA, FL 34476

Title: S () Delete
Name: WILERSON, QUIANA
Address: 17671 NE 16TH TERR
City-St-Zip: CITRA, FL 32113

Title: D () Delete
Name: SCHAEFER, MARIE
Address: 10545 SE 150TH PL
City-St-Zip: SUMMERLAND, FL 34491

Title: P () Delete
Name: VIDAL, ROSANGELA
Address: 17348 NE 39TH COURT
City-St-Zip: CITRA, FL 32113

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:

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: ROSANGELA VIDAL

MRS

01/06/2009

Electronic Signature of Signing Officer or Director

Date