

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2009
Secretary of State

DOCUMENT# N08000002144

Entity Name: H & E OUTREACH MINISTRIES INC.

Current Principal Place of Business:

4537 CLAM SHELL DRIVE
JACKSONVILLE, FL 32218 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 77249
JACKSONVILLE, FL 32226 US

New Mailing Address:

4537 CLAM SHELL DRIVE
JACKSONVILLE, FL 32218 US

FEI Number: 26-2236038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVERETT, CARMELITA P
4537 CLAM SHELL DRIVE
JACKSONVILLE, FL 32218 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: HOGAN, RODERICK
Address: 4537 CLAM SHELL DRIVE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: S,T () Delete
Name: EVERETT, CARMELITA
Address: 4537 CLAM SHELL DRIVE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: VP () Delete
Name: RICHARDSON, JAMES R
Address: 2435 BURNS DR
City-St-Zip: MIDDLEBERG, FL 32068 US

Title: D () Delete
Name: JOHNSON, CHERYL
Address: 10168 AUTUMN PARK CT
City-St-Zip: FT WORTH, TX 76140 US

Title: D () Delete
Name: MORRISON, LAWERENCE
Address: 1717 GROVE PT RD #9
City-St-Zip: SAVANNAH, GA 31419 US

Title: D () Delete
Name: HENSON, PHILLIP
Address: 10037 COLONIAL CREEK LN
City-St-Zip: JACKSONVILLE, FL 32219 US

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
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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: RODERICK HOGAN

P

04/25/2009

Electronic Signature of Signing Officer or Director

Date