2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# N08000006793

Entity Name: DUGIT MESSIANIC OUTREACH CENTER, INC.

Current Principal Place of Business:

5345 ORTEGA BLVD., SUITE 10
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

5345 ORTEGA BLVD., SUITE 10
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 91-2129546 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WRIGHT, ELIZABETH
2045 RIVERSIDE AVE., #2408
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

WRIGHT, ELIZABETH
2789 POST ST
JACKSONVILLE, FL 32205 US

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: ELIZABETH WRIGHT 02/05/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: STOKES, JOSEPH B JR.
Address: 586 THORNWOOD LANE
City-St-Zip: ORANGE PARK, FL 32073

Title: T ( ) Delete
Name: KARRER, MAX
Address: 1747 LORD BYRON LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: T ( ) Delete
Name: WRIGHT, ELIZABETH
Address: 2045 RIVERSIDE AVE., #2408
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: WRIGHT, ELIZABETH
Address: 2789 POST ST
City-St-Zip: JACKSONVILLE, FL 32205

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: ELIZABETH WRIGHT MRS 02/05/2009
Electronic Signature of Signing Officer or Director Date