

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010877

FILED
Apr 29, 2009
Secretary of State

Entity Name: VISION OF DOMINION OUTREACH, INC.

Current Principal Place of Business:

2901 NW 126TH AVE., #2-325
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 540544
MIAMI, FL 33054

New Mailing Address:

FEI Number: 26-3800231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KEMP-WILLIAMS, LISA
2901 NW 126TH AVE., #2-325
SUNRISE, FL 33323 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: PFD () Delete
Name: KEMP-WILLIAMS, LISA
Address: 2901 NW 126TH AVE., #2-325
City-St-Zip: SUNRISE, FL 33323

Title: VD () Delete
Name: WILLIAMS, MELVIN
Address: 2901 NW 126TH AVE., #2-325
City-St-Zip: SUNRISE, FL 33323

Title: S () Delete
Name: HALLMON, ALTHEA
Address: 2901 NW 126TH AVE., #2-325
City-St-Zip: SUNRISE, FL 33323

Title: D (X) Delete
Name: CLARK, JONAS
Address: 2901 NW 126TH AVE., #2-325
City-St-Zip: SUNRISE, FL 33323

Title: D (X) Delete
Name: GIBSON, JOANN
Address: 2901 NW 126TH AVE., #2-325
City-St-Zip: SUNRISE, FL 33323

Title: D (X) Delete
Name: NEGRON, BETTY
Address: 2901 NW 126TH AVE., #2-325
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: GIBSON, JOANN
Address: 2901 NW 126TH AVE., #2-325
City-St-Zip: SUNRISE, FL 33323

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: MELVIN WILLIAMS

VD

04/29/2009

Electronic Signature of Signing Officer or Director

Date