

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011584

FILED  
Jul 16, 2009  
Secretary of State

**Entity Name:** SHOWERS OF BLESSING OUTREACH, INC.

**Current Principal Place of Business:**

4970 NW 12 STREET  
LAUDERHILL, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

4970 NW 12 STREET  
LAUDERHILL, FL 33313

**New Mailing Address:**

**FEI Number:** 26-1785887      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

JONES, JEANIE  
4970 NW 12 STREET  
LAUDERHILL, FL 33313      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: CHRM      ( ) Delete  
Name: JONES, MICHAEL L  
Address: 4970 NW 12 STREET  
City-St-Zip: LAUDERHILL, FL 33313

Title: D      ( ) Delete  
Name: JONES, MICHAEL L  
Address: 4970 NW 12 STREET  
City-St-Zip: LAUDERHILL, FL 33313

Title: SD      ( ) Delete  
Name: HICKS, CARLA  
Address: 8875 NW 27TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: T      ( ) Delete  
Name: HICKS, CARLA ASST.  
Address: 8875 NW 27TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TD      ( ) Delete  
Name: JONES, JEANIE  
Address: 4970 NW 12 STREET  
City-St-Zip: LAUDERHILL, FL 33313

Title: S      ( ) Delete  
Name: JONES, JEANIE ASST.  
Address: 4970 NW 12 STREET  
City-St-Zip: LAUDERHILL, FL 33313

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SD      (X) Change ( ) Addition  
Name: NORVEL, CHRISTINE  
Address: 2676 NW 25 STREET  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: T      (X) Change ( ) Addition  
Name: JONES, MARCEY ASST.  
Address: 120 NW 16TH AVENUE  
City-St-Zip: POMPANO BEACH, FL 33069

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: JEANIE JONES

P

07/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date