

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000040

FILED
Mar 24, 2010
Secretary of State

Entity Name: POWER TO CHANGE OUTREACH MINISTRY INCORPORATED

Current Principal Place of Business:

2704 WEST AVERY ST, 5
PENSACOLA, FL 32506

New Principal Place of Business:

2704 WEST AVERY ST.
5
PENSACOLA, FL 32506

Current Mailing Address:

2704 WEST AVERY ST, 5
PENSACOLA, FL 32506

New Mailing Address:

2704 WEST AVERY ST.
5
PENSACOLA, FL 32506

FEI Number: 26-3850085

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENKINS, KATIE
7680 HWY 98 WEST APT 66
PENSACOLA, FL 32506 US

Name and Address of New Registered Agent:

JENKINS, KATIE D PASTOR
6501 WEST HWY 98
606
PENSACOLA, FL 32506 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: KATIE JENKINS

03/24/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: HARGRAVES, MAURICE L
Address: 2704 WEST AVERY ST. # 5
City-St-Zip: PENSACOLA, FL 32505

Title: S
Name: WOODS, GENJI R
Address: 2704 WEST AVERY ST, 5
City-St-Zip: PENSACOLA, FL 32505

Title: PAS
Name: JENKINS, KATIE D
Address: 2704 WEST AVERY ST. # 5
City-St-Zip: PENSACOLA, FL 32505

Title: ASST
Name: SAMS, ELAINE B
Address: 2704 WEST AVERY ST. # 5
City-St-Zip: PENSACOLA, FL 32505

I hereby 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 all other like empowered.

SIGNATURE: MAURICE HARGRAVES

D

03/24/2010

Electronic Signature of Signing Officer or Director

Date