

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005295

FILED  
Mar 30, 2011  
Secretary of State

**Entity Name:** FRESH OUTPOURING MINISTRIES, INC.

**Current Principal Place of Business:**

871 SUPERIOR STRET  
DELTONA, FL 32725

**New Principal Place of Business:**

**Current Mailing Address:**

871 SUPERIOR STRET  
DELTONA, FL 32725

**New Mailing Address:**

**FEI Number:** 27-2761689

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARRIS, CLIFFORD D  
871 SUPERIOR STREET  
DELTONA, FL 32725 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  
Name: HARRIS, CLIFFORD D  
Address: 871 SUPERIOR STREET  
City-St-Zip: DELTONA, FL 32725

Title: VP  
Name: HARRIS, STACEY D  
Address: 871 SUPERIOR STREET  
City-St-Zip: DELTONA, FL 32725

Title: VP  
Name: PARSHALL, JUSTIN K  
Address: 2408 MONTE CRISTO WAY  
City-St-Zip: SANFORD, FL 32771

Title: SECR  
Name: YATES, RANDALL K  
Address: 113 SAN LUCIA DR.  
City-St-Zip: DEBARY, FL 32713

Title: TREA  
Name: TURNER, PHIL  
Address: 79 SPRING GLEN DR  
City-St-Zip: DEBARY, FL 32713

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: CLIFFORD DWAYNE HARRIS

P

03/30/2011

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

\_\_\_\_\_  
Date