

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13129

FILED  
Apr 28, 2006  
Secretary of State

**Entity Name:** OUTREACH MINISTRY FOR JESUS INC., OF DELRAY BEACH, FLORIDA

**Current Principal Place of Business:**

1801 12TH AVE SOUTH  
LAKE WORTH, FL 33461 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 618  
LAKE WORTH, FL 33460 US

**New Mailing Address:**

**FEI Number:** 59-2709340

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RATHELL, RICHARD  
5078 NORTHERN LIGHTS DRIVE  
GREEN ACRE, FL 33463 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: PD ( ) Delete  
Name: RATHELL, RICHARD  
Address: 5078 NORTHERN LIGHTS DRIVE  
City-St-Zip: GREEN ACRE, FL 33463

Title: VD ( ) Delete  
Name: LEGGETT, ROOSEVELT,  
Address: 1501 RAIL ROAD AVE., #3  
City-St-Zip: LAKE WORTH, FL

Title: TD ( ) Delete  
Name: ROBERTS, MICHAEL  
Address: 10076 FREESIAN WAY  
City-St-Zip: LAKE WORTH, FL 33467

Title: SD ( ) Delete  
Name: MCPHERSON, SANDRA E.,  
Address: 534 N W 9TH AVE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: T ( ) Delete  
Name: BANKS, SARAH M  
Address: 1510 SOUTH K LANE APT 1  
City-St-Zip: LAKE WORTH, FL

Title: T ( ) Delete  
Name: LOGAN, LENORA  
Address: 1404 13TH AVE  
City-St-Zip: WEST PALM BEACH, FL 33401

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

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

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

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

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 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: SANDRA E. MCPHERSON

SD

04/28/2006

Electronic Signature of Signing Officer or Director

Date