2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13129

FILED Apr 13, 2009 Secretary of State

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

Current Principal Place of Business:			New Principal Place of Business:		
1801 12TH AVE SOUTH LAKE WORTH, FL 33461 US					
Current Mailing Address:			New Mailing Address:		
PO BOX 618 LAKE WORTH, FL 33460 US					
FEI Number:	59-2709340	FEI Number Applied For () FEI Nu	ımber Not Applicab	ole ()	Certificate of Status Desired (X)
Name and	Address of Cur	rent Registered Agent:	Name and Ad	dress of	New Registered Agent:
RATHELL, RICHARD 5078 NORTHERN LIGHTS DRIVE GREEN ACRES, FL 33463 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:					
	Electronic	Signature of Registered Agent			Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () De RATHELL, RICHAF 5078 NORTHERN GREEN ACRES, F	RD LIGHTS DRIVE	Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name: Address: City-St-Zip:	VD () De LEGGETT, ROOSE 1501 RAIL ROAD / LAKE WORTH, FL	EVELT AVE., #3	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	T () De ROBERTS, MICHA 10076 FREESIAN LAKE WORTH, FL	EL WAY	Address: 517	YATT, DEB 7 20TH AV	X) Change ()Addition ORAH 'ENUE NORTH H, FL 33460
Title: Name: Address: City-St-Zip:	TD () De MCPHERSON, SAI 534 N W 9TH AVE BOYNTON BEACH	NDRA E	Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name: Address: City-St-Zip:	T () De BANKS, SARAH M 2350 LANTANA RO LANTANA, FL 334	DAD	Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name: Address: City-St-Zip:	SD () De WYATT, TIFFANY 4053 SANDRA LAI WEST PALM BEAG	NE	Title: Name: Address: City-St-Zip:	() Change ()Addition

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: SANDRA E. MCPHERSON TD 04/13/2009