


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90279 037 ****70.00

| | | | | | |
|--|---|---|--|--|--|
| DOCUMENT # N16504 1. Entity Name OUTREACH FOR CHRIST MINISTRIES INC. | | | |  | |
| Principal Place of Business 493 S.W. LEGION DR. LAKE CITY, FL 32024 US | | | | Mailing Address 493 S.W. LEGION DR. LAKE CITY, FL 32024 US | |
| 2. Principal Place of Business SAME | | 3. Mailing Address SAME | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | 4. FEI Number 59-2870342 | |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | | | | Applied For Not Applicable | |
| 6. Name and Address of Current Registered Agent HART, HUGH A 493 S.W. LEGION DR LAKE CITY, FL 32024 | | | | 7. Name and Address of New Registered Agent Name Frederic Frederic M. Salsgiver Street Address (P.O. Box Number is Not Acceptable) 12916 N.E. WALDO RD City GAINSVILLE FL Zip Code 32609 | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE <u><i>Frederic M. Salsgiver</i></u> FREDERIC M. SALSGIVER PRES 4-28-05 <small>Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating) DATE</small> | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2005 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| Make check payable to Florida Department of State | | | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P CHURCH, FRANK 941 WALDRON ST LAKE CITY, FL 32025 | <input checked="" type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TR HESTER, HARVEY 4548 LONE LAKE RD WELLBORN, FL 32094 | <input checked="" type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T HART, JOYCE A 493 S.W. LEGION DR. LAKE CITY, FL 32024 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP CHURCH, FRANK 1752-1 COUNTRY CLUB RD LAKE CITY, FL 32025 | <input checked="" type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P HART, HUGH A 493 S.W. LEGION DR LAKE CITY, FL 32024 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TR HESTER, KETRINA 4549 LOWE LAKE RD. WELLBORN, FL 32094 | <input checked="" type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP HUGH A. HART 493 S.W. LEGION DR. LAKE CITY, FL 32024 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P FREDERIC M. SALSGIVER 12916 N.E. WALDO RD GAINSVILLE, FL 32609 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TR SUSAN C. SALSGIVER 12916 N.E. WALDO RD. GAINSVILLE, FL 32609 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with or other like empowered. | | | | | |
| SIGNATURE <u><i>Hugh A. Hart</i></u> HUGH A. HART 4/28/05 336-752-1115 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> | | | | | |