


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2005 8:00 am
Secretary of State

02-28-2005 90220 033 ****70.00

DOCUMENT #.N19118	
1. Entity Name	
THE VERNON EVANGELISTIC CHURCH GLOBAL OUTREACH INCORPORATED	


Principal Place of Business	Mailing Address
HWY 79 P.O. BOX 298 VERNON FL 32462 US	HWY 79 P.O. BOX 298 VERNON FL 32462 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
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Zip	Country	Zip	Country
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50019867



1st MOORE CR2E037 (10/04)

4. FEI Number	Applied For
59-2027421	Not Applicable

5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
SAPP, JERRY W 3350 BONNETT BOND RD CHIPLEY FL 32428	

7. Name and Address of New Registered Agent	
Name	<u>Calvin Sherrouse</u>
Street Address (P.O. Box Number is Not Acceptable)	
<u>2150 Hwy 173</u>	
City	<u>Benifay</u>
State	<u>FL</u>
Zip Code	<u>32425</u>

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: Calvin Sherrouse Pastor 2-24-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: 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
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10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete
NAME	BROCK, KENNETH
STREET ADDRESS	3493 HOLMES VALLEY RD.
CITY-ST-ZIP	VERNON FL 32462
TITLE	D <input type="checkbox"/> Delete
NAME	OWENS, GARY
STREET ADDRESS	3474 SPOOLMILL RD
CITY-ST-ZIP	VERNON FL 32462
TITLE	D <input type="checkbox"/> Delete
NAME	SHAW, SCOTT
STREET ADDRESS	2941 MOSS HILL RD
CITY-ST-ZIP	VERNON FL 32462
TITLE	ST <input type="checkbox"/> Delete
NAME	SHAW, SUE
STREET ADDRESS	3446 SPOOLMILL ROAD
CITY-ST-ZIP	VERNON FL 32462
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 all other like empowered.

SIGNATURE: Sue Shaw Sue Shaw 2-24-05 (850)535-2281
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #