

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28702

FILED  
Mar 11, 2007  
Secretary of State

Entity Name: WORLD OUTREACH, INC.

## Current Principal Place of Business:

5042 TIMUQUANA ROAD  
JACKSONVILLE, FL 32210

## New Principal Place of Business:

## Current Mailing Address:

5042 TIMUQUANA ROAD  
JACKSONVILLE, FL 32210

## New Mailing Address:

FEI Number: 59-3038067

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERGUSON, ANTHONY D  
5042 TIMUQUANA ROAD  
JACKSONVILLE, FL 32210 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: D ( ) Delete  
Name: FERGUSON, ANTHONY D  
Address: 933 LAKERIDGE DR  
City-St-Zip: ORANGE PARK, FL 32065

Title: V ( ) Delete  
Name: BICKERSTAFF, CHARLES  
Address: 5042 TIMUQUANA RD.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: TR ( ) Delete  
Name: WATERS, LINDA  
Address: 5042 TIMUQUANA RD.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: TR ( ) Delete  
Name: WATERS, JIM  
Address: 5042 TIMUQUANA RD.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: TR ( ) Delete  
Name: DABNEY, BUCKINGHAM  
Address: 5042 TIMUQUANA RD.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: TR ( ) Delete  
Name: ROBERT, FOOSHEE  
Address: 5042 TIMUQUANA RD.  
City-St-Zip: JACKSONVILLE, FL 32210

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: FERGUSON, ANTHONY D REVREND  
Address: 933 LAKERIDGE DR  
City-St-Zip: ORANGE PARK, FL 32065

Title: V (X) Change ( ) Addition  
Name: YANCEY, THERESA  
Address: 5042 TIMUQUANA RD.  
City-St-Zip: JACKSONVILLE, FL 32210

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: ADN FERGUSON

D

03/11/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date