2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29750

FILED Jun 25, 2007 Secretary of State

Entity Name: INSPIRATIONAL CHURCH OF JESUS AND OUTREACH MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 35 NE 20TH ST. LEVY COUNTY RD. 514 WILLISTON, FL 32696 **New Mailing Address: Current Mailing Address:** 1778 LAKEVIEW VILLAGE DRIVE BRANDON, FL 33510 FEI Number: 59-2976032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAKER, ADA 1778 LAKEVIEW VILLAGE DRIVE BRANDON, FL 33510 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: (X) Change () Addition () Delete BAKER, ROBERT L. PAS, TOR BAKER, ROBERT L. PAS, TOR Name: Name: 1778 LAKEVIEW DRIVE Address: 1778 LAKEVIEW VILLAGE DR Address: City-St-Zip: BRANDON, FL 33510 City-St-Zip: BRANDON, FL 33510 Title: Title: () Delete (X) Change () Addition BAKER, ADA Name: BAKER, ADA Name: Address: 1778 LAKEVIEW DRIVE Address: 1778 LAKEVIEW VILLAGE DR City-St-Zip: BRANDON, FL 33510 City-St-Zip: BRANDON, FL 33510 Title: () Delete Title: (X) Change () Addition WALLACE, JOHN WALLACE, JOHN Name: Name: 1778 LAKEVIEW VILLAGE DR. 2035 N.E. 20TH STREET Address: Address: City-St-Zip: BRANDON, FL 33510 City-St-Zip: WILLISTON, FL 32696 Title: () Delete Title: () Change () Addition Name: MITCHELL, WHITNEY Name: 1778 LAKEVIEW VILLAGE DR Address: Address: City-St-Zip: BRANDON, FL 33510 City-St-Zip: Title: () Delete Title: () Change () Addition WALLACE, JOAN Name: Name: 2035 NE 20TH ST Address: Address: City-St-Zip: WILLISTON, FL 32696 City-St-Zip: Title: () Delete Title: () Change () Addition WALLACE, JOHN Name: Name: Address: 2035 NE 20TH ST Address: WILLISTON, FL 32696 City-St-Zip: City-St-Zip:

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: ADA BAKER VP 06/25/2007