## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N34240

FILED Apr 01, 2008 Secretary of State

Entity Name: JESUS CHRIST OUTREACH CENTER OF FORT MYERS, INC.

	rincipal Place of	Business:	New Principal Pla	New Principal Place of Business:	
	LARD ROAD S, FL 33916 U	JS			
urrent Mailing Address:			New Mailing Add	New Mailing Address:	
	DENIA AVENUE ERS, FL 33916				
l Number	: 65-0205982	FEI Number Applied For()	FEI Number Not Applicable()	) Certificate of Status Desired ( )	
ame and	l Address of Cur	rent Registered Agent:	Name and Addres	ss of New Registered Agent:	
17 GAR	, HALSEY JR. DENIA AVENUE S, FL 33916 L	JS			
	e named entity sub e of Florida.	mits this statement for the p	urpose of changing its regist	tered office or registered agent, or both	
GNATU		Signature of Registered Age	nt	Date	
FICER	S AND DIRECTO			NGES TO OFFICERS AND DIRECTO	
e: ne: dress: y-St-Zip:	PD () De WATKINS, HALSE' 1517 GARDENIA A FT. MYERS, FL	elete Y D. J, R.	Title: Name: Address: City-St-Zip:	() Change () Addition	
e: me:	VD () De WATKINS, LINDA I 1517 GARDENIA A FT. MYERS, FL	D.,	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
y-St-Zip: e: me: dress:	SD () De BOUGHT, FRAN K 2129 DAVIS ST FORT MYERS, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
dress: y-St-Zip: e: me: dress: y-St-Zip: e: me: dress: dress:	BOUGHT, FRAN K 2129 DAVIS ST	33916 elete ED DR.	Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	
e: me: dress: y-St-Zip: e: me: dress:	BOUGHT, FRAN K 2129 DAVIS ST FORT MYERS, FL TD () De WALLACE, WILFR 1518 BROOKHILL	33916 elete ED DR. 33916 elete	Name: Address: City-St-Zip: Title: Name: Address:		

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: HALSEY WATKINS, JR. PD 04/01/2008