2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2006
Secretary of State

DOCUMENT# N41545

Entity Name: OUT THERE MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

14020 MT. PLEASANT ROAD
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

14020 MT. PLEASANT ROAD
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-3052401 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIS, CLIFFORD WELDON
14020 MT. PLEASANT ROAD
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

WILLIS, CLIFFORD W PD
14020 MT. PLEASANT ROAD
JACKSONVILLE, FL 32225 US

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: CLIFFORD W. WILLIS 04/29/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WILLIS, CLIFFORD WEL, DON
Address: 14020 MT. PLEASANT RD.
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete
Name: WILLIS, ELIZABETH M
Address: 14020 MT. PLEASANT RD.
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete
Name: LYNCH, DON
Address: 2701 HODGES BLVD
City-St-Zip: JACKSONVILLE, FL 32224

Title: VD ( ) Delete
Name: DUKE, DAN
Address: 1130 KINGS RD
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: D ( ) Delete
Name: ZINK, PAUL D
Address: 205 NORTHWINDS CT
City-St-Zip: JACKSONVILLE, FL 32082

Title: D ( ) Delete
Name: SANFILLIPO, ANDY
Address: 11135 E CHESTER LAKE RD
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: WILLIS, ELIZABETH M
Address: 14020 MT. PLEASANT RD.
City-St-Zip: JACKSONVILLE, FL 32225

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change ( ) Addition
Name: DUKE, DAN
Address: 9951 ATLANTIC BLVD. #159
City-St-Zip: JACKSONVILLE, FL 32225

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: CLIFFORD W. WILLIS PD 04/29/2006
Electronic Signature of Signing Officer or Director Date