

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49451

FILED
Mar 23, 2005
Secretary of State

Entity Name: HOLINESS OUTREACH MINISTRY, INC.

Current Principal Place of Business:

1559 WEST 28TH ST
JACKSONVILLE, FL 32209 US

New Principal Place of Business:

Current Mailing Address:

805 ST CLAIR ST
JACKSONVILLE, FL 32254

New Mailing Address:

FEI Number: 59-3134426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, JESSIE
805 ST. CLAIR ST.
JACKSONVILLE, FL 32254 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: JACKSON, JESSIE,
Address: 1755 WEST 10TH ST.
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: JACKSON, SHARON,
Address: 1755 WEST 10TH ST.
City-St-Zip: JACKSONVILLE, FL

Title: SD () Delete
Name: JOYCE BRITTON,
Address: 833 TURTLE CREEK DR
City-St-Zip: JACKSONVILLE, FL 32218

Title: VD () Delete
Name: HAMMONDS, WALTER S
Address: 1081 RHOND RD.
City-St-Zip: JACKSONVILLE, FL 32254

Title: TRD () Delete
Name: WILLIAMS, CARL A
Address: 1656 W. 31 ST.
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: JESSIE JACKSON

D

03/23/2005

Electronic Signature of Signing Officer or Director

Date