

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004458

FILED
Mar 01, 2007
Secretary of State

Entity Name: ECCELSIA OUTREACH MINISTRY, INC.

Current Principal Place of Business:

1001 PAUL RUSSELL ROAD
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

1001 PAUL RUSSELL ROAD
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-3208001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, REITA
1001 PAUL RUSSELL RD.
TALLAHASSEE, FL 32301 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: PD () Delete
Name: DIXON, RENITA
Address: 1001 PAUL RUSSELL ROAD
City-St-Zip: TALLAHASSEE, FL 32301

Title: SD () Delete
Name: GASPER, ADELA
Address: 1001 PAUL RUSSELL ROAD
City-St-Zip: TALLAHASSEE, FL 32301

Title: 2VP () Delete
Name: DIXON, JENZELL
Address: 1001 PAUL RUSSELL RD.
City-St-Zip: TALLAHASSEE, FL 32314

Title: D () Delete
Name: WHITE, ETTA
Address: 8424 LENOVA DR.
City-St-Zip: TALLAHASSEE, FL 32310

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 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: ELLA P. DICKEY

MRS.

03/01/2007

Electronic Signature of Signing Officer or Director

Date