## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000005719

FILED Jan 08, 2009 Secretary of State

Entity Name: OUTREACH MINISTRIES PENSACOLA, FLORIDA, INC.

Current Principal Place of Business:		New Principal Place of Business:
	IDHAM RD FL 32570 US	
Current N	Mailing Address:	New Mailing Address:
	IDHAM RD FL 32570 US	
El Numbe	r: 59-1854157 FEI Number Applied F	For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
lame an	d Address of Current Registered A	Agent: Name and Address of New Registered Agent:
329 WIN	I & GLENNIS PEADEN IDHAM RD FL 32570 US	
	e named entity submits this statemer te of Florida.	nt for the purpose of changing its registered office or registered agent, or bot
n the Stat	te of Florida. <sup>*</sup> IRE:	
the Stat	te of Florida.	nt for the purpose of changing its registered office or registered agent, or both
n the Stat SIGNATU	te of Florida. <sup>*</sup> IRE:	
n the State  SIGNATU  DFFICER  itle: ame: ddress:	te of Florida.  IRE:  Electronic Signature of Regis  RS AND DIRECTORS:  P () Delete PEADEN, GLENNIS 5329 WINDHAM RD	tered Agent Date
on the State SIGNATU  DFFICER  itle: lame: ddress: itle: lame: ddress:	te of Florida.  IRE:  Electronic Signature of Regis  S AND DIRECTORS:  P () Delete PEADEN, GLENNIS 5329 WINDHAM RD MILTON, FL 32570  T () Delete PEADEN, ADDISON 5329 WINDHAM RD	Date  ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  Title: ( ) Change ( ) Addition  Name:  Address:
n the Stat SIGNATU	te of Florida.  IRE:  Electronic Signature of Regis  RS AND DIRECTORS:  P () Delete PEADEN, GLENNIS 5329 WINDHAM RD MILTON, FL 32570  T () Delete PEADEN, ADDISON 5329 WINDHAM RD MILTON, FL 32570  T () Delete PEADEN, DDISON T () Delete PEADEN, DOY 4845 AUTUMN DR	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition 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: GLENNIS PEADEN P 01/08/2009