2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007
Secretary of State

DOCUMENT# N95000000508

Entity Name: MIRACLE CENTER WORLD OUTREACH, INC.

Current Principal Place of Business:

5810 WEST CYPRESS STREET
SUITE-A
TAMPA, FL 33607 US

New Principal Place of Business:

Current Mailing Address:

5810 WEST CYPRESS STREET
SUITE-A
TAMPA, FL 33607 US

New Mailing Address:

FEI Number: 59-3291237 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURKE, WILLIAM C
5810 WEST CYPRESS STREET
SUITE A
TAMPA, FL 33607 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: JAMES, JOSEPH P
Address: 5211 CYPRESS PALMS LA
City-St-Zip: TAMPA, FL 33647

Title: DVP ( ) Delete
Name: BURKE, MELANIE R
Address: 5115 WEST PLATT ST.
City-St-Zip: TAMPA, FL 33609

Title: T ( ) Delete
Name: MULOCK, MARK
Address: 17902 ST CROIX ISLE DR
City-St-Zip: TAMPA, FL 33647

Title: S ( ) Delete
Name: STOCKHAUSEN, JOHN
Address: 2806 SPANISH OAK COURT
City-St-Zip: CLEARWATER, FL 34621

Title: P ( ) Delete
Name: BURKE, WILLIAM C
Address: 5115 W PLATT ST
City-St-Zip: TAMPA, FL 33609

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:

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: WILLIAM C BURKE DP 04/12/2007

Electronic Signature of Signing Officer or Director — Date