2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N95000002545

Entity Name: INTERNATIONAL STREET KIDS OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

28960 US HWY 19 NORTH
CLEARWATER, FL 33761 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 8551
CLEARWATER, FL 33758 US

New Mailing Address:

FEI Number: 59-3317828 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHMIDT, JOHN
28960 US HWY 19 NORTH
CLEARWATER, FL 33761 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:	PRES	( ) Delete
Name:	SCHMIDT, JOHN	
Address:	810 MEADOW LANE	
City-St-Zip:	WOOSTER, OH 44691	
Title:	BM	( ) Delete
Name:	HAMILTON, SCOTT W ESQUIRE	
Address:	2400 MANATEE AVE. W.	
City-St-Zip:	BRADENTON, FL 34205	
Title:	BM	( ) Delete
Name:	BULLIAN, AARON T	
Address:	6202 NORTH HIMES AVE.	
City-St-Zip:	TAMPA, FL 33614	
Title:	BM	( ) Delete
Name:	JOY, COREY	
Address:	8933 ST. ANDREWS DR.	
City-St-Zip:	SEMINOLE, FL 33777	

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 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: JOHN SCHMIDT PRES 04/14/2009

Electronic Signature of Signing Officer or Director — Date