

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000002545

**FILED**  
**Mar 25, 2011**  
**Secretary of State**

**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:**

1433 SOUTH MISSOURI AVE.  
CLEARWATER, FL 33756 US

**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 (X)**

**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:**

SCHMIDT, JOHN  
1433 SOUTH MISSOURI AVE  
CLEARWATER, FL 33756 US

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:

03/25/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: SCHMIDT, JOHN  
Address: 810 MEADOW LANE  
City-St-Zip: WOOSTER, OH 44691

Title: BM  
Name: FERGUSON, DAVID  
Address: 7706 ALVINA STREET  
City-St-Zip: TAMPA, FL 33625

Title: BM  
Name: HUBRIC, BEVERLY  
Address: 8732 KENWOOD ROAD  
City-St-Zip: SEMINOLE, FL 33777 US

Title: BM  
Name: JOY, COREY  
Address: 8933 ST. ANDREWS DR.  
City-St-Zip: SEMINOLE, FL 33777

I hereby 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 all other like empowered.

SIGNATURE: JOHN SCHMIDT

DIR.

03/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date