2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005465

City-St-Zip:

TAMPA, FL 33687

FILED Apr 23, 2008 Secretary of State

Entity Nai	me: LION OF	JUDAH WORLD OUTREAC	H, INC.			
Current Principal Place of Business:				New Principal Place of Business:		
11570 SAN JOSE BLVD, STE 11 JACKSONVILLE, FL 32223				9737 NW 41ST SUITE 489 DORAL, FL 33178		
Current Mailing Address:				New Mailing Address:		
11570 SAN JOSE BLVD, STE 11 JACKSONVILLE, FL 32223				9737 NW 41ST SUITE 489 DORAL, FL 33178		
FEI Number:	: 59-3343634	FEI Number Applied For ()	FEI Nun	nber Not Applicable()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
5978 WAK	Z DEL VALLE (ULLA SPRINC IVILLE, FL 32:	SS ROAD				
	named entity e of Florida.	submits this statement for the	purpose o	f changing its register	red office or registered agent, or both,	
SIGNATU	RE:					
Electronic Signature of Registered Agent			gent		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DEL VALLE, JU	A SPRINGS ROAD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GONZALEZ DE) Delete EL VALLE, KIMBERLY M LA SPRINGS ROAD E, FL 32258		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SIMONIC, NICI	TER PARK BLVD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (MC DONNOUD P.O. BOX 1629			Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: KIMBERLY M. GONZALEZ DEL VALLE **VDS** 04/23/2008