

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005465

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: LION OF JUDAH WORLD OUTREACH, INC.

## Current Principal Place of Business:

9737 NW 41ST  
SUITE 489  
DORAL, FL 33178

## New Principal Place of Business:

## Current Mailing Address:

9737 NW 41ST  
SUITE 489  
DORAL, FL 33178

## New Mailing Address:

FEI Number: 59-3343634

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ DEL VALLE, JUAN C  
5978 WAKULLA SPRINGS ROAD  
JACKSONVILLE, FL 32258 US

## Name and Address of New Registered Agent:

GONZALEZ DEL VALLE, JUAN C  
6864 NW 109TH AVE  
DORAL, FL 33178 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: JUAN C GONZALEZ DEL VALLE

04/27/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DEL VALLE, JUAN CARLO G  
Address: 5978 WAKULLA SPRINGS ROAD  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VDS ( ) Delete  
Name: GONZALEZ DEL VALLE, KIMBERLY M  
Address: 5978 WAKULLA SPRINGS ROAD  
City-St-Zip: JACKSONVILLE, FL 32258

Title: DT ( ) Delete  
Name: SIMONIC, NICKOLAS  
Address: 8750 PERIMETER PARK BLVD  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete  
Name: MC DONNOUDH, JANE  
Address: P.O. BOX 16298  
City-St-Zip: TAMPA, FL 33687

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DEL VALLE, JUAN CARLO G  
Address: 6864 NW 109TH AVE.  
City-St-Zip: DORAL, FL 33178

Title: VDS (X) Change ( ) Addition  
Name: GONZALEZ DEL VALLE, KIMBERLY M  
Address: 6864 NW 109TH AVE.  
City-St-Zip: DORAL, FL 33178

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: KIMBERLY M. GONZALEZ DEL VALLE

VDS

04/27/2009

Electronic Signature of Signing Officer or Director

Date