

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Feb 08, 2012**  
**Secretary of State**

DOCUMENT# N96000005611

**Entity Name:** ALMARIE OUTREACH MINISTRIES, INC.**Current Principal Place of Business:**2540 N.W. 21 STREET  
FT. LAUDERDALE, FL 33311 US**New Principal Place of Business:****Current Mailing Address:**2540 N.W. 21 STREET  
FT. LAUDERDALE, FL 33311 US**New Mailing Address:**3637 HIGH PINE DRIVE  
CORAL SPRINGS, FL 33065 US**FEI Number:** 65-0703860**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BRYAN, EDRED C  
3637 HIGH PINE DRIVE  
CORAL SPRINGS, FL 33065 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: DP  
Name: BRYAN, EDRED C  
Address: 3637 HIGH PINE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: DS  
Name: THOMAS, KIM  
Address: 7911 NW 74 AVENUE  
City-St-Zip: TAMARAC, FL 33321

Title: T  
Name: BRYAN, ALETA E  
Address: 3637 HIGH PINE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: DS  
Name: BRYAN, RUTH E  
Address: 8769 SW TROPICAL AVENUE  
City-St-Zip: STUART, FL 34997

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: EDRED C. BRYAN

DP

02/08/2012

Electronic Signature of Signing Officer or Director

Date