2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# N96000005678

Entity Name: SUPERNATURAL OUTREACH MINISTRY, INC.

Current Principal Place of Business:

455 DEPOT AVENUE
DELRAY BEACH, FL 33447

New Principal Place of Business:

Current Mailing Address:

455 DEPOT AVENUE
DELRAY BEACH, FL 33447

New Mailing Address:

FEI Number: 65-0704168 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDREWS, DAVID
455 DEPOT AVENUE
DELRAY BEACH, FL 33447 US

Name and Address of New Registered Agent:

ANDREWS, JULIA
455 DEPOT AVENUE
DELRAY BEACH, FL 33444 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: JULIA ANDREWS 04/26/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CAIN, COURTNEY
Address: 1900 NE 2ND LANE
City-St-Zip: BOYNTON BCH, FL 33435

Title: D ( ) Delete
Name: ANDREWS, JULIA
Address: 401 DEPOT AVENUE
City-St-Zip: DELRAY BEACH, FL 33447

Title: VPD ( ) Delete
Name: MITCHELL, ELNORA
Address: PO BOX 8317
City-St-Zip: DELRAY BEACH, FL 33482

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MITCHELL, ELNORA
Address: 1401 WASHINGTON AVENUE
City-St-Zip: DELRAY BEACH, FL 33444

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: ANDREWS, ROBBIE
Address: 455 DEPOT AVENUE
City-St-Zip: DELRAY BEACH, FL 33444

I hereby certify that the information supplied with this filing does not qualify for the 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: ELNORA C MITCHELL D 04/26/2006
Electronic Signature of Signing Officer or Director Date