

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005678

FILED
May 14, 2009
Secretary of State

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:

POST OFFICE BOX 8317
DELRAY BEACH, FL 33482

FEI Number: 65-0704168 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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

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

Title: D () Delete
Name: THOMPSON, KAREEM
Address: 2850 PALMWOOD TERR 228
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ELNORA C MITCHELL

D

05/14/2009

Electronic Signature of Signing Officer or Director

Date