2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N97000002100

HOLINESS OF EMMANUEL OUTREACH MINISTRIES. INC.

1. Entity Name

Principal Place of Business

2841 NW 11TH ST.

CHURCH

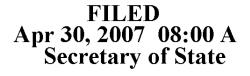
FORT LAUDERDALE, FL 33311

Mailing Address

2980 S.W. 2ND CT.

HOUSE

FT. LAUDERDALE, FL 33312





DO NOT WRITE IN THIS SPACE

04082007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0735640

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Applied For

6. Name and Address of Current Registered Agent

HICKS, RUTH M REV. 2980 S.W. 2ND COURT FORT LAUDERDALE, FL 33312

the obligations of registered agent.

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SIGNATURE.	Rev. Tu H M Hicks Signature, typed or printed name of registered agent and title it a	applicable. INOTE: Registered Agent	signature required when reinstating)	PASJER 4/29/07	
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECT	ORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HICKS, RUTH M 2980 S.W. 2ND COURT FORT LAUDERDALE, FL 33312				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BENSON, JAMIE L 491 NW 42 AVE PLANTATION, FL 33317				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DUDLEY, DOROTHY 3000 NW 17TH CT FORT LAUDERDALE, FL 33311		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINNS, ANNIE B 491 NW 42 AVE PLANTATION, FL 33317				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAILS, GREGORY L 2980 SW 2ND CT FORT LAUDERDALE, FL 33312		U00000748167 05/17/07-80055-013 70.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KEYES, SHARELL B 2980 SW 2ND CT FORT LAUDERDALE, FL 33312				
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					

8. 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. I am familiar with, and accept