

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002100

FILED
Apr 22, 2009
Secretary of State

Entity Name: HOLINESS OF EMMANUEL OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

2841 NW 11TH ST.
CHURCH
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

2841 NW 11TH ST.
FORT LAUDERDALE, FL 33311

Current Mailing Address:

2980 S.W. 2ND CT.
HOUSE
FT. LAUDERDALE, FL 33312

New Mailing Address:

2980 SW 2ND COURT
FORT LAUDERDALE, FL 33312

FEI Number: 65-0735640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HICKS, RUTH M REV.
2980 S.W. 2ND COURT
FORT LAUDERDALE, FL 33312 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: PD () Delete
Name: HICKS, RUTH M
Address: 2980 S.W. 2ND COURT
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SD () Delete
Name: BENSON, JAMIE L
Address: 491 NW 42 AVE
City-St-Zip: PLANTATION, FL 33317

Title: TD () Delete
Name: DUDLEY, DOROTHY
Address: 3000 NW 17TH CT
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D () Delete
Name: WINNS, ANNIE B
Address: 491 NW 42 AVE
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: BAILS, GREGORY L
Address: 2980 SW 2ND CT
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: T () Delete
Name: KEYES, SHARELL B
Address: 2980 SW 2ND CT
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: DUDLEY, DOROTHY
Address: 3639 SW 13TH COURT APT.3
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D (X) Change () Addition
Name: WINNS, ANNIE B
Address: 3530 NW 52 AVE APT.403
City-St-Zip: LAUDERDALE LAKES, FL 33319

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: RUTH M. HICKS

PD

04/22/2009

Electronic Signature of Signing Officer or Director

Date