2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003378

FILED Apr 16, 2009 Secretary of State

Entity Name: I'M REDEEMED OUTREACH CHRISTIAN CENTER, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
790 BARTO ROCKLED	ON BLVD GE, FL 32955	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
2476 MER COCOA, F	CURY DRIVE L 32926				
FEI Number:	59-3451724	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
	PASTOR ANTH H INDIAN RIVE L 32922 US	ER DRIVE			
	named entity s of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () SMITH, SYLVIA 2476 MERCURY COCOA, FL 32	Y DRIVE	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	S () GODWIN, SUZA 6707 MANGROV MERRITT ISLAN	VE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () LOPEZ, ORLEN 6434 BAMBOO COCOA, FL 32	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () KARR, BRIAN 2045 ROCKLED ROCKLEDGE, F		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name:	D () KARR, TAMMY 2045 ROCKLED	Delete	Title: Name: Address:	() Change () Addition	

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: SYLVIA Y. SMITH PRES 04/16/2009