2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002919

FILED May 12, 2005 Secretary of State

Entity Name: PEOPLE NEED THE LORD OUTREACH MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 2157 SW 151 AVE 4417 STERLING RD PEMBROKE PINES, FL 33027 **DANIA, FL 33314 Current Mailing Address: New Mailing Address:** %EVANG. ELIN THOMAS-CAMMOCK P.O. BOX 6406 FT. LAUDERDALE, FL 33310 FEI Number: 65-0837545 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: Name and Address of New Registered Agent: NELSON, EULA 3961 NW 34 AVE LAUDERDALE LAKES, FL 33309 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete THOMAS-CAMMOCK, ELIN THOMAS-CAMMOCK, ELIN Name: Name: 5900 N.E. 22ND AVE. Address: 2157 SW 151 AVE. Address: MIRAMAR, FL 33027 City-St-Zip: FT. LAUDERDALE, FL 33308 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RICE, BILL BSHP Name: Address: 19930 SW 12 ST. Address: City-St-Zip: HOLLYWOOD, FL 33029 City-St-Zip: Title: () Delete Title: () Change () Addition WALTERS, DONOVAN Name: Name: Address: 2157 SW 151 AVE Address: City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RANGER, MITCHELLE Name: Address: 3751 NW 25TH ST. Address: City-St-Zip: FORT LAUDERDALE, FL 33311 City-St-Zip: Title: () Delete Title: () Change () Addition GOLARB, MAUDELINE Name: Name: 2250 SW 62ND AVE Address: Address: City-St-Zip: MIRAMAR, FL 33023 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELIN THOMAS-CAMMOCK D 05/12/2005