


FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N98000006857					
1. Corporation Name LAUNCH OUT MINISTRIES, INC.					
Principal Place of Business 3781 SW 18TH STREET FORT LAUDERDALE FL 33312			Mailing Address 3781 SW 18TH STREET FORT LAUDERDALE FL 33312		

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STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business 21 5769 COCONUT BLVD Suite, Apt. #, etc.		2a. Mailing Address 26 5769 COCONUT BLVD Suite, Apt. #, etc.		3. Date Incorporated or Qualified 11/30/1998	
22 City & State 23 Royal Palm Bch, FL		27 City & State 28 Royal Palm Bch, FL		4. FEI Number 65-087-4818	
24 33411-8545 25 USA		29 33411-8545 30 USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent PARKER, THOMAS 3781 SW 18TH STREET FORT LAUDERDALE FL 33312				10. Name and Address of New Registered Agent 81 Name 82 Georgia Ellen Deffenbaugh 83 Street Address (P.O. Box Number is Not Acceptable) 5769 COCONUT BLVD 84 City Royal Palm Beach FL 85 Zip Code 33411			
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Georgia E. Deffenbaugh (NOTE: Registered Agent Signature required when reinstating) DATE March 4, 1999

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKER, THOMAS 3781 SW 18TH STREET FORT LAUDERDALE FL 33312 <input checked="" type="checkbox"/> DELETE	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	D JERRY G. DEFFENBAUGH 5769 COCONUT BLVD ROYAL PALM BCH FL, 33411-8545 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, BRENDA 350 N. JOG ROAD WEST PALM BEACH FL 33413 <input checked="" type="checkbox"/> DELETE	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	S PAT UPTHEGROVE 300 N. JOG RD W. PALM BCH FL 33413 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, CYNTHA 320 SHADY LANE PALM SPRINGS FL 33461 <input type="checkbox"/> DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	 *****01-25 *****01-25 -03/17/99--01098--002
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEFFENBAUGH, ELLEN 5769 COCONUT BOULEVARD ROYAL PALM BEACH FL 33411 <input type="checkbox"/> DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	D Georgia Ellen Deffenbaugh 5769 COCONUT BLVD Royal Palm Bch, FL, 33411-8545 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 <input type="checkbox"/> DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 <input type="checkbox"/> DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	 <input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Georgia E. Deffenbaugh Date 3/4/99 Daytime Phone # 561-753-6325

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