

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000244

FILED
May 28, 2008
Secretary of State

Entity Name: SHEAR KNOW HOW OUTREACH MINISTRY, INC.

Current Principal Place of Business:

3590 NW 29 STREET
LAUDERDALE LAKES, FL 33311

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 101072
FT LAUDERDALE, FL 33310

New Mailing Address:

FEI Number: 65-0934644 **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:

POWELL, STEPHANIE
3590 NW 29 STREET
LAUDERDALE LAKES, FL 33311 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:

Title: P () Delete
Name: GILES, JACKI
Address: 901 NW 11TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: CEO () Delete
Name: POWELL, EDDIE
Address: P.O. BOX 101072
City-St-Zip: FORT LAUDERDALE, FL 33310

Title: T () Delete
Name: POWELL, STEPHANIE
Address: 3590 NW 29 STREET
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: BM () Delete
Name: POWELL, DONOVAN
Address: 7936 SISKIN AVENUE
City-St-Zip: JACKSONVILLE, FL 32219

Title: S () Delete
Name: POWELL, ALIYAH
Address: 3590 NW 29 STREET
City-St-Zip: LAUDERDALE LAKES, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: EDWARD POWELL

CEO

05/28/2008

Electronic Signature of Signing Officer or Director

Date