

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # N99000001102**

1. Entity Name  
**UNITED CHRISTIAN OUTREACH MINISTRIES, INC.**



Principal Place of Business  
**6248 NW 15TH AVE  
MIAMI, FL 33147**

Mailing Address  
**7630 NW 14TH AVE  
MIAMI, FL 33167**



04262007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0861433**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**GLENN, JOHNNY L  
7630 NW 14TH AVE.  
MIAMI, FL 33147**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DP  
GLENN, JOHNNY  
1800 NW 81 ST  
MIAMI, FL 33147**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TD  
PETERSON, LAWRENCE  
7600 NW 14TH AVE  
MIAMI, FL 33147**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DV  
SMITH, XAVIER  
6520 SW 30 STREET  
MIRAMAR, FL 33023**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
ROBERTS, LINDA  
4931 NW 11TH AVE.  
MIAMI, FL 33127**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

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05/17/07-80004-012 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE**

*Lawrence Peterson*  
**LAWRENCE PETERSON**

**4/26/07**

Date

**305 641 3219**

Daytime Phone #