

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000002390

**FILED**  
**Jul 06, 2010**  
**Secretary of State**

**Entity Name:** THE HOLY WORD OUTREACH CENTER, INC.

**Current Principal Place of Business:**

3715 WOODVILLE HWY  
TALLAHASSEE, FL 32305

**New Principal Place of Business:**

**Current Mailing Address:**

3715 WOODVILLE HWY  
TALLAHASSEE, FL 32305

**New Mailing Address:**

**FEI Number:** 59-3572193

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DIXON, ROBERT L  
3715 WOODVILLE HWY  
TALLAHASSEE, FL 32305 US

**Name and Address of New Registered Agent:**

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: PD  
Name: DIXON, ROBERT L PASTOR  
Address: 3715 WOODVILLE HWY  
City-St-Zip: TALLAHASSEE, FL 32305

Title: T  
Name: DIXON, MIRIAM W  
Address: 2983 GOLDEN EAGLE DR. E.  
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD  
Name: BURNS, TRACY  
Address: 1020 SUTOR RD.  
City-St-Zip: TALLAHASSEE, FL 32303

Title: S  
Name: BURNS, J DEJABA  
Address: 3727 WOODVILLE HIGHWAY  
City-St-Zip: TALLAHASSEE, FL 32305

I hereby 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 all other like empowered.

SIGNATURE: PASTOR ROBERT L. DIXON

PD

07/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date