

# 2000 UNIFORM BUSINESS REPORT (UBR)

1/27/00-90010-020-\$61.25-\$61.25

DOCUMENT # N99000005631

1. Entity Name

THE PEOPLE OUTREACH MINISTRIES, INC.

FILED

00 MAR 23 PM 1:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

1712 TAMARIND AVE.  
W. PALM BEACH FL 33407

Mailing Address

1712 TAMARIND AVE.  
W. PALM BEACH FL 33407-6234

2. Principal Place of Business

1712 TAMARIND

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

West Palm Bch

City & State

Zip Country

33407 P Bch

33407

4. FEI Number

65 0949023

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MCINTOSH, SUSAN  
1712-TAMARIND AVE.  
W. PALM BEACH FL 33407

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE P  
NAME MCINTOSH, SUSAN  
STREET ADDRESS 1712 TAMARIND AVE.  
CITY-ST-ZIP W. PALM BEACH FL 33407

TITLE S  
NAME SKYERS, CRISTIAN  
STREET ADDRESS 861 36TH ST.  
CITY-ST-ZIP W. PALM BEACH FL 33407

TITLE T  
NAME MORGAN, CINTIA  
STREET ADDRESS 5100 45TH ST.  
CITY-ST-ZIP W. PALM BEACH FL 33407

TITLE Trustee  
NAME STEPHAN HARRIS  
STREET ADDRESS 1555 MARTIN LUTHER KING BLVD  
CITY-ST-ZIP RIVIERA Bch 33404

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.

TITLE President  
NAME SUSAN MCINTOSH  
STREET ADDRESS 1712 TAMARIND AVE  
CITY-ST-ZIP W. PALM BEACH FL 33407

TITLE Trustee  
NAME SKYERS, CRISTIAN  
STREET ADDRESS 861 36TH ST W P B, FL 33407

TITLE Trustee  
NAME CYNTHIA MORGAN  
STREET ADDRESS 5100 45th St WPB, FL 33407

TITLE Trustee  
NAME STEPHAN HARRIS  
STREET ADDRESS 1515 MARTIN LUTHER KING BLVD  
CITY-ST-ZIP RIVIERA Bch 33404

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 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: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

KE