2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14641

FILED Feb 16, 2006 Secretary of State

Entity Name: WAY OF THE CROSS OUTREACH, INC. **Current Principal Place of Business: New Principal Place of Business:** 6907 NW HERSHY CIRCLE PORT SAINT LUCIE, FL 34983 **Current Mailing Address: New Mailing Address:** 6907 NW HERSHY CIRCLE PORT SAINT LUCIE, FL 34983 FEI Number: 61-0922741 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOWLDS, EDWARD 6907 HERSHY CIRCLE PORT ST. LUCIE, FL 34983 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BOWLDS, EDWARD, Name: Name: Address: 6907 HERSHY CIRCLE Address: City-St-Zip: PORT ST. LUCIE, FL City-St-Zip: Title: STD () Delete Title: () Change () Addition Name: BOWLDS, DOROTHY, Name: Address: 6907 HERSHY CIRCLE Address: City-St-Zip: PORT ST. LUCIE, FL City-St-Zip: Title: VD () Delete Title: () Change () Addition NELSON, KENNETH Name: Name: Address: 836 MADISON STREET Address: City-St-Zip: HARTFORD, KY 42347 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: EC BOWLDS PD 02/16/2006