

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000009329

**Entity Name:** CONTINUAL OUTPOURING INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business:**

3639 CENTRAL AVE.  
ST. PETERSBURG, FL 33713

**Current Mailing Address:**

PO BOX 290161  
TAMPA, FL 33687 US

**FEI Number:** 20-5493589

**Certificate of Status Desired:** No

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

SIMS, CARLOS E  
11205 TYLER DR.  
PORT RICHEY, FL 34668 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:** CARLOS E. SIMS

04/30/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PASTOR, FOUNDER

Name SIMS, CARLOS E

Address 11205 TYLER DR.

City-State-Zip: PORT RICHEY FL 34668

Title DIRECTOR OF MINISTRY AFFAIRS

Name SIMS, LYNNE

Address 11205 TYLER DR.

City-State-Zip: PORT RICHEY FL 34668

Title DIRECTOR OF HOSPITALITY

Name JENKINS, TRINA

Address 6410 N. 20TH ST.

City-State-Zip: TAMPA FL 33610

Title CFO

Name HENRY, MARSHA

Address 2327 UNION ST

City-State-Zip: ST PETERSBURG FL 33712

Title DIRECTOR OF PUBLIC RELATIONS

Name JACKSON, PATRICIA

Address 6502 N. 22ND ST.

City-State-Zip: TAMPA FL 33610

*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:** CARLOS SIMS

PASTOR

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date