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.

PASTOR

SIGNATURE: MARY SETZLER

Electronic Signature of Signing Officer/Director Detail

Entity Name: HIS WORD OUTREACH MINISTRIES INC.

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

729 MOORE STREET BALDWIN, FL 32234

Current Mailing Address:

729 MOORE STREET BALDWIN, FL 32234

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

SETZLER, MARY E 729 MOORE STREET BALDWIN, FL 32210 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	: PASTOR MARY SETZLER			04/25/2016
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	S	Title	Т	
Name	MELTON, KEYSA D	Name	BAKER, PRINCESS L	
Address	11011 HARTS RD 1101	Address	5176 JOHNSON CREEK DRIVE	
City-State-Zip:	JACKSONVILLE FL 32218	City-State-Zip:	JACKSONVILLE FL 32218	
Title	PASTOR	Title	SECRETARY	
Name	SETZLER, MARY E	Name	TAYLOR, LETIONA M	
Address	5176 JOHNSON CREEK DRIVE	Address	11011 HARTS ROAD 1101	
City-State-Zip:	JACKSONVILLE FL 32218	City-State-Zip:	-	
Title	ASST. TREASURER			
Name	SMITH, JIMMIE			
Address	5176 JOHNSON CREEK DRIVE			
City-State-Zip:	JACKSONVILLE32218 FL			

Certificate of Status Desired: Yes

FILED Apr 25, 2016 Secretary of State CC9704966160

Date

04/25/2016