

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 26 1996 8:00 am
Secretary of State

DOCUMENT # 730993 (3)
1. Corporation Name
OUTREACH BROWARD, INC.



Principal Place of Business: 1038 NE 4 AVE, FT. LAUDERDALE FL 33304 US
Mailing Address: 1038 NE 4 AVE, FT. LAUDERDALE FL 33304 US

3. Date Incorporated or Qualified: 10/30/1974
3a. Date of Last Report: 02/08/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

4. FEI Number: 23-7432181
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**MYRICK, BARBARA
431 N.E. 9TH AVE.
FORT LAUDERDALE FL 33301**

10. Name and Address of New Registered Agent (81-85) fields.

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when registering.) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT TEDESCO, PATRICE 1718 SE 13TH STREET FORT LAUDERDALE FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE PRESIDENT BITNER, GARY 1330 SE 4th AVENUE FORT LAUDERDALE, FL 33316
TITLE	VPT SHAILER, MIDGE 1138 S RIO VISTA BLVD FORT LAUDERDALE FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE 1st VICE PRESIDENT THOMAS, JEFF 11960 SW 18th COURT DAVIE, FL 33325
TITLE	VPT CROSS, JOYCE 1966 COLONIAL DRIVE FORT LAUDERDALE FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE 2nd VICE PRESIDENT TUFTS, JUDY 2565 NE 26th AVENUE FORT LAUDERDALE, FL 33305
TITLE	ST SIELICKI, PAM 1316 N RIO VISTA BLVD FT. LAUDERDALE FL	<input checked="" type="checkbox"/> DELETE	4.1 TITLE SECRETARY JERNIGAN, SKEET P. O. Box 2266 N/A FORT LAUDERDALE, FL 33303
TITLE	HANNAKA, SHERRY 3170 N FEDERAL HWY., SUITE 106 LIGHTHOUSE POINT FL	<input checked="" type="checkbox"/> DELETE	5.1 TITLE TREASURER RICHARDS, JEANNINE 820 SW 16th STREET FORT LAUDERDALE, FL 33315
TITLE	ED MYRICK, BARBARA 431 N.E. 9TH AVE. FT. LAUDERDALE FL	<input type="checkbox"/> DELETE	6.1 TITLE 900001758499 -03/26/96--01165--002 ***70.00

1.2 NAME	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.2 NAME	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.2 NAME	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.2 NAME	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.2 NAME	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.2 NAME	Change <input type="checkbox"/> Addition <input type="checkbox"/>
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Barbara J. Myrick*
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR: Barbara J. Myrick, Executive Director
Date: 1-22-96
Distinguishing Prefix #: 954-768-1996
Date: 5/5/96 2-76-96

CR2E037 (12/95)