NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

AHAC #N2

FILED
Feb 24, 2002 8:00 am
Secretary of State
02-24-2002 90002 013 ****70.00

DOCUMENT # N27264

1. Entity Name
LAMBDA OUTREACH, INC. d/b/a/ OUTREACH COMMUNITY CARE NETWORK

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
111 N. Frederick Avenue	P.O. Box 9177
Suite, Apt. #, etc. Suite 500	Suite, Apt. #, etc.
City & State Daytona Beach, FL	City & State Daytona Beach, FL
Zip 32114 Country Volusia U.S.A.	Zip 32120 Country U.S.A

4. FEI Number 59-2897172 ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ XX **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Dixie L. Morgese

Street Address (P.O. Box Number is Not Acceptable) 97 Treasure Lane

City Ormond Beach **FL** Zip Code 32176

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 Dixie L. Morgese 2/1/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

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	Executive Director	TITLE	
NAME	Dixie L. Morgese	NAME	
STREET ADDRESS	97 Treasure Lane	STREET ADDRESS	
CITY-ST-ZIP	Ormond Beach, FL 32176	CITY-ST-ZIP	
TITLE	President	TITLE	
NAME	Mark Van Fleet	NAME	
STREET ADDRESS	2545 S. Atlantic Ave.	STREET ADDRESS	
CITY-ST-ZIP	Daytona Beach, FL 32118	CITY-ST-ZIP	
TITLE	Vice President	TITLE	
NAME	Roy Lenois	NAME	
STREET ADDRESS	762 S. Nova Road	STREET ADDRESS	**DO NOT WRITE**
CITY-ST-ZIP	Daytona Beach, FL 32114	CITY-ST-ZIP	
TITLE	Treasurer	TITLE	
NAME	Jose'Silva	NAME	**IN THIS SPACE**
STREET ADDRESS	9 Crescent Lake Way	STREET ADDRESS	
CITY-ST-ZIP	Ormond Beach, FL 32174	CITY-ST-ZIP	
TITLE	Secretary	TITLE	
NAME	Rev. Chris Caldwell, Ph.D.	NAME	
STREET ADDRESS	142 Fairview Ave.	STREET ADDRESS	
CITY-ST-ZIP	Daytona Beach, FL 32114	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Dixie L. Morgese 2/1/02 386 255-5569
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment 824598
#N27264

LAMBDA OUTREACH, INC. d/b/a/ OUTREACH
COMMUNITY CARE NETWORK

2002 BOARD OF DIRECTORS

OFFICERS:

Mark B. Van Fleet	President
Roy Lenois-	Vice President
Jose' Silva-	Treasurer
Rev. Chris Caldell, Ph.D.	Secretary

BOARD MEMBERS

Syed Ahmed, M.D.
Jean Barnes
Mickey Barnes
Corey Bundza
Gerald Frisbee
Tracey Johnson
Phyllis LaVigna
Kenneth Reeves
Leonard West
Scott Zwicker

EX-OFFICIO

Dixie L. Morgese	Executive Director
Don Young, C.P.A.	Finance Committee

Attachment/824598

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State
04-23-2001 90244 016 ****70.00

000276

DOCUMENT # N27264

1. Entity Name

LAMBDA OUTREACH, INC.

Principal Place of Business	Mailing Address
119 S. PALMETTO AVE STE 101 DAYTONA FL 32114 US	119 S. PALMETTO AVE STE 101 DAYTONA FL 32114 US

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2897172 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MORGESE, DIXIE L 97 TREASURE LN ORMOND BEACH FL 32176	Name: Mark Van Fleet Street Address (P.O. Box Number is Not Acceptable): ~~1571 Wyngate Drive~~ 2545 S. ATLANTIC AVENUE, #508 City: ~~Deland~~ DAYTONA BEACH SH, FL Zip Code: ~~32724~~ 32118

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: Mark B Van Fleet MARK B. VAN FLEET ACTING EXECUTIVE DIRECTOR 4.10.2001
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILEY, HELEN 635 TARRAGONA WAY DAYTONA BCH FL	☒ Delete	SD CALDWELL, CHRIS (REV.) CENTRAL BAPTIST CHURCH, 142 FAIRVIEW AVE. DAYTONA BEACH, FL 32114	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RIDER, LINDA 1330 S. WOODLAND BLVD DEBARY FL 32721	☐ Delete	PD RIDER, LINDA 1330 S. WOODLAND BLVD. DEBARY FL 32721	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MORGESE, DIXIE 97 TREASURE LANE DAYTONA BEACH FL 32176	☐ Delete	D MORGESE, DIXIE 97 TREASURE LANE, ORMOND BEACH FL 32176	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD VAN FLEET, MARK ~~1571 WYNGATE DR~~ 2545 S. ATLANTIC AVE, 508 ~~DELAND FL 32724~~ DAYTONA BCH SHORES FL 32118	☐ Delete	D JOHNSON, TRACEY 112 S. 5th STREET FLAGLER BEACH FL 32136	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUREK, PAUL 288 JEFFREY AVE HOOLY HILL FL 32117	☒ Delete	D LAVIGNA, PHYLLIS 116 SNOW GOODE COURT DAYTONA BEACH FL 32119	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D NANCE, DWIGHT 68 BURNING BUSH DR. PALM COAST FL 32135	☐ Change ☒ Addition

CR2E037 (10/00)

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: Mark B Van Fleet MARK VAN FLEET 904-255-5569
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

Attachment
DOC# N27264
824598 [redacted]

DOCUMENT # N27264

1. Entity Name

LAMBDA OUTREACH, INC.

Principal Place of Business	Mailing Address
119 S. PALMETTO AVE STE 101 DAYTONA FL 32114 US	119 S. PALMETTO AVE STE 101 DAYTONA FL 32114 US

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2897172 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MORGESE, DIXIE L 97 TREASURE LN ORMOND BEACH FL 32176	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

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Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILEY, HELEN 235 TARRAGONA WAY DAYTONA BCH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMALL, KENNETH DAYTONA BEACH POLICE DEPT., 990 ORANGE AV DAYTONA BEACH FL 32114	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RIDER, LINDA 1330 S. WOODLAND BLVD DEBARY FL 32721	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THOMAS, BOBBIE 413 MAIN TRAIL ORMOND BEACH FL 32174	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MORGESE, DIXIE 97 TREASURE LANE DAYTONA BEACH FL 32176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EX-OFFICIO STEWART, EDWARD H. 2 WILLOW COURT ORMOND BEACH FL 32174	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD VAN FLEET, MARK 1571 WYNGATE DR DELAND FL 32724	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUREK, PAUL 269 JEFFREY AVE HOLLY HILL FL 32117	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment # NO72641 / 824598

State of Florida

Department of State

I certify from the records of this office that OUTREACH COMMUNITY CARE NETWORK is a Fictitious Name registered with the Department of State on September 8, 2000.

The Registration Number of this Fictitious Name is G00251900272.

I further certify that said Fictitious Name Registration is active.

I further certify that this office began filing Fictitious Name Registrations on January 1, 1991, pursuant to Section 865.09, Florida Statutes.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Eighth day of September, 2000

Katherine Harris

Katherine Harris
Secretary of State

CR2EO22 (1-99)

Attachment # NQ72609/824598

Outreach Community Care Network

119 South Palmetto Avenue, Suite 101 ♿ Daytona Beach, FL 32114-4344 ♿ (386) 255-5569 Fax (386) 255-5277 ♿ www.outreachinc.org

OUTREACH COMMUNITY CARE NETWORK

BOARD RESOLUTION

By action of the quorum of the duly empowered Executive Committee of the Board of Directors, on May 23, 2001 at 2:30 P.M., effective June 1, 2001, the new Executive Director of the Outreach Community Care Network is:

Dixie L. Morgese, BA, CAP
267-37-3264

Linda E. Rider
Linda Rider, Board Chair

Funded in part by these agencies:

Attachment #N07264/ 824598

Outreach Community Care Network

111 North Frederick Avenue Daytona Beach, FL 32120-9177 (386) 255-5569 Fax (386) 255-5277 www.outreachinc.org

February 6, 2002

Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, Fl., 32302-1500

Dear Sir or Madam:

Enclosed please find our 2002 Amended Uniform Business Report along with the following documents:
1.Copy of 2002 Board of Directors
2.Copy of 2001 Uniform Business Report
3.Copy of Fictitious Name Registration
4.Copy of the Board Resolution
5.Check for the Amended UBR and the Certificate of Status

Please feel free to call if there is any questions, 386-255-5569

Sincerely:

Dixie L. Morgese
Executive Director

Funded in part by these agencies:
Florida Department of Health
HIV/AIDS Bureau Ryan White CARE Act
United Way