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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthadi

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT #
1. Corporation Name

N96000002671 (3)

OUTREACH FOR YOUTH II, INC.

Principal Place of Business						
1097	ANNE	MATTOX	AVE.			

Mailing Address

1097 ANNIE MATTOX AVE.

FILED May 15 1997 8:00am Secretary of State



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Sure, Apt #, etc. Sure,						3. Date incorporated or Qualified 05/13/1996	3a. Date of Last	Report
Size. Api #. etc Suite. Apt #. etc Suite. Apt #. etc. S. Certificate of Status Dealted Fee Prequiend Fee Prequiend City & State	2. Principal Place of Busines	SS .	2a. Mailing Address	•		4. FEI Number		
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2 2 30 8. This corporation has lability for Intengible Lax under s. 199 032, 199		,	⊢ ′					
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name 12. Street Address of New Registered Agent 12. Prevalent to the provisions of Sections 617 6502 and 617 1608, Florids Statutes, the abover-areas of corporation submits this elatement for the purpose or changing the registered register of registered register, or both in the State of Florids Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered registered register, or both in the State of Florids Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I an hamilar with, and accept the obligations of, Section 617 6503, Florids Statutes. 13. The provisions of Section 617 6502 and 617 1608, Florids Statutes, the abover-areas or provisions of Section 617 6503, Florids Statutes. 14. Prevalent to the provisions of Section 617 6503, Florids Statutes, the abover-areas or provisions of the purpose or changing the registered agent. I an hamilar with, and accept the obligations of, Section 617 6503, Florids Statutes. 15. SIGNATURE 15. The provisions of Section 617 6503 and 617 1608, Florids Statutes. 16. Charge agent signature registered segment for the purpose or changing the registered agent. I hereby accept the appointment as registered agent. I hereby accept the ap	23				nto.			
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Pursuant to the provisions of Sections 617 0000 and 617 1000, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered Agent of the color in the State of Florida. Sociol changes assure the above-named corporation submits this statement for the purpose of changing its registered Agent in the purpose of chang		¬ ´	··········		rilly			6. 199.032,
JERNICAN, WAYNE 1097 ANNIE MATTOX AVE. LAKE CITY FL 32055 B4 City FL 85 Zip Code 11. Pursuant to the provisions of Socions 617,0502 and 617,1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, an familiar with, and accept the chigations of, Section 617,0503, Florids Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, an familiar with, and accept the chigations of, Section 617,0503, Florids Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, an familiar with, and accept the chigations of, Section 617,0503, Florids Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and the purpose of changing its registered spent advanced agent significant required when remaining) DATE OFFICERS AND DIRECTORS IN 12 Change Date Total Date Date Date Date Date Date Date Date			II	30				
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1097 ANNE MATTOX AVE. LAKE CITY FL 32055 BB City FL BB Zip Code T1. Pursuant to the provisions of Socions 617.0502 and 617.1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am animalism with, and accept the collegions of, Section 617.0503, Priorida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE MAY AND STREET ADDRESS 13. INTEX ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Addition Add					Traine		<u> </u>	
LAKE CITY FL 32055 B4 City FL B5 Zip Code T1. 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 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 and the state of Florida Statutes. SIGNATURE SIGNATURE					82 Street Address (P.O. Box Number is Not Acceptable)			
B4 City					83			
11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. TITLE 15. TITLE	LAKE CITY FL 32055	ı			83			
11. Pursuant to the provisions of Sections 617 6502 and 617 1500. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its replatered office or registered agent, or both, in the State of Florida. Such change was submitted by the corporation's board of directors. I hereby accept the appointment as registered agent and the State of Florida. Such change was submitted by the corporation's board of directors. I hereby accept the appointment as registered agent and the if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. AD	•			i	84 City	, , , , , , , , , , , , , , , , , , , ,	FL 85 Zi	p Code
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 and manual with, and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE Dignature, typed or prived nemic disagnished agent and line if applicable (NOTE Registered Agent alignature inequired agent revolution). DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THILE CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. INTILE CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. INTILE CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. INTILE CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. INTILE CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. INTILE CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS AND DIRECTORS IN 12. 19. INTILE CHANGE ADDRESS TO OFFICERS ADDRESS	11 Pursuant to the provision	ns of Sections 617 0502 a	and 617 1508. Florida Statute	es. the al	ove-named corn	poration submits this statement for the pr	urnose of changing	its registered
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	14 Ldo hereby certify that t	the information supplied	with this filing does not quali	fy for the	exemption states	d in Section 119.07(3)(i). Florida Statute	s. I further certify the	nat 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 chapped, or on an attachment with an address.

WAYNE HERNIGAN-PRESIDENT

3/25/97