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Feb 13 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N97000003831 (1)

1. Corporation Name:

NEVUS OUTREACH, INC.

Principal Place of Business

Mailing Address

3788 MARIA CIRCLE
TALLAHASSEE FL 32303

3788 MARIA CIRCLE
TALLAHASSEE FL 32303

2. Principal Place of Business

21 4545 BOWFIN DRIVE
Suite, Apt #, etc.

22 City & State

23 TALLAHASSEE, FL
Zip Country

24 32303 25 USA

2a. Mailing Address

26 1616 ALPHA STREET
Suite, Apt #, etc.

27 City & State

28 LANSING MI
Zip Country

29 48910 30 USA

3. Date Incorporated or Qualified

07/03/1997

4. FEI Number

59-34-55128

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, TINA
3788 MARIA CIRCLE
TALLAHASSEE FL 32303

81 Name

WILLIAMS, TINA M

82 Street Address (P.O. Box Number is Not Acceptable)

4545 BOWFIN DRIVE

83

84 City

TALLAHASSEE

FL

85 Zip Code

32303

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

Tina Williams

TINA WILLIAMS

1-13-98

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME WILLIAMS, TINA M
STREET ADDRESS 3788 MARIA CIRCLE
CITY-ST-ZIP TALLAHASSEE FL 32303

☐ DELETE

TITLE D
NAME WILLIAMS, KEVIN M
STREET ADDRESS 3788 MARIA CIRCLE
CITY-ST-ZIP TALLAHASSEE FL 32303

☐ DELETE

TITLE D
NAME POWERS, DOUGLAS C
STREET ADDRESS 1616 ALPHA ST
CITY-ST-ZIP LANSING MI 48910

☐ DELETE

TITLE D
NAME POWERS, KELLY J
STREET ADDRESS 1616 ALPHA ST
CITY-ST-ZIP LANSING MI 48910

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME WILLIAMS, TINA M
1.3 STREET ADDRESS 4545 BOWFIN DRIVE
1.4 CITY-ST-ZIP TALLAHASSEE FL 32303

☒ Change ☐ Addition

2.1 TITLE PRESIDENT
2.2 NAME WILLIAMS, KEVIN M
2.3 STREET ADDRESS 4545 BOWFIN DRIVE
2.4 CITY-ST-ZIP TALLAHASSEE FL 32303

☒ Change ☐ Addition

3.1 TITLE VICE PRESIDENT
3.2 NAME JEFF CURTIS
3.3 STREET ADDRESS 7414 BAKERS COURT
3.4 CITY-ST-ZIP SPRINGFIELD VA 22153

☐ Change ☒ Addition

4.1 TITLE SECRETARY
4.2 NAME SUSAN CECARONE
4.3 STREET ADDRESS PO BOX 1562
4.4 CITY-ST-ZIP HAWTHORNE FL 32640

☐ Change ☒ Addition

5.1 TITLE
5.2 NAME KAREN Zimmer
5.3 STREET ADDRESS 673 MELINDA COURT
5.4 CITY-ST-ZIP SANTA MARIA, CA 93455

☐ Change ☒ Addition

6.1 TITLE
6.2 NAME MARK BECKWITH
6.3 STREET ADDRESS 13000 E. 51ST STREET
6.4 CITY-ST-ZIP TULSA, OK 74134

☐ Change ☒ Addition

14. 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 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:

Kevin Williams

KEVIN WILLIAMS

1/13/98

878-2558 x40

CR2E037 (10/97)