

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003146

FILED
Apr 30, 2009
Secretary of State

Entity Name: THE RESTORATION AND REFUGE OUTREACH CENTER INCORPORATION

Current Principal Place of Business:

202 HAZELWOOD ROAD
TALLAHASSEE, FL 32305

New Principal Place of Business:

200/202 HAZELWOOD ROAD
TALLAHASSEE, FL 32305

Current Mailing Address:

POST OFFICE BOX 5235
TALLAHASSEE, FL 323145235

New Mailing Address:

FEI Number: 59-3610799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWEETING, ERNESTINE W
202 HAZELWOOD ROAD
TALLAHASSEE, FL 32305 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BROWN, FELICIA
Address: 904 BRIANDAV
City-St-Zip: TALLAHASSEE, FL 32305

Title: BO () Delete
Name: SWEETING, RUFUS
Address: 200 HAZELWOOD ROAD
City-St-Zip: TALLAHASSEE, FL 32305

Title: PAST () Delete
Name: SWEETING, ERNESTINE W
Address: 200 HAZELWOOD RD
City-St-Zip: TALLAHASSEE, FL 32305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SCREEN, ERNESTINE
Address: 2003 KAREN LANE
City-St-Zip: TALLAHASSEE, FL 32304

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ERNESTINE W SWEETING

PAST

04/30/2009

Electronic Signature of Signing Officer or Director

Date