

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19405

FILED
Jan 04, 2005
Secretary of State

Entity Name: RESCUE OUTREACH MISSION OF SANFORD, INC.

Current Principal Place of Business:

1701 W. 13TH STREET
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

PO BOX 412
SANFORD, FL 32771

New Mailing Address:

FEI Number: 59-1432974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWEN, ROGER D
GREENE, DYCUS & CO., PA
205 N ELM AVE
SANFORD, FL 32771 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: BURKE, RICHARD L
Address: 143 ESTATES CIRCLE
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: PITILPOTT, MELVIN
Address: 466 BRIGHTVIEW DR.
City-St-Zip: LAKE MARY, FL 32746

Title: T () Delete
Name: NELSON, SCOTT
Address: 585 TECHNOLOGY PARK
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: LOCKETT, LEROY
Address: 616 SARITA STREET
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RICHARD BURKE

PRES

01/04/2005

Electronic Signature of Signing Officer or Director

Date