2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003835

23115 AMETHYST ST

PT CHARLOTTE, FL 33952

Address:

City-St-Zip:

FILED Jul 16, 2008 Secretary of State

Entity Nan	ne: SOMNIO OUTREACH SERVICES, IN	C.		
Current Pr	incipal Place of Business:	New Princ	cipal Place of Business:	
17446 YOU PT CHARL	ING AVE OTTE, FL 33948			
Current Mailing Address:		New Maili	New Mailing Address:	
P O BOX 380866 PT CHARLOTTE, FL 33948			17446 YOUNG AVE PT CHARLOTTE, FL 33948	
FEI Number: In accordance	FEI Number Applied For() e with s. 607.193(2)(b), F.S., the corporation did	FEI Number Not Appl not receive the prior notic		
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
The above	ING AVE OTTE, FL 33948 US named entity submits this statement for the	e purpose of changing i	its registered office or registered agent, or both,	
in the State	of Florida.			
SIGNATUR	RE:			
	Electronic Signature of Registered A	gent	Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete MORTON, LYNDSEY 17446 YOUNG AVE PT CHARLOTTE, FL 33948	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () Delete TUTTERROW, KERI 1213 SE 36TH ST CAPE CORAL, FL 33904	Title: Name: Address: City-St-Zip:	D (X) Change () Addition MORTON, ANTHONY 17446 YOUNG AVE PORT CHARLOTTE, FL 33948	
Title: Name:	SD () Delete BIRNER, JACQUELINE	Title: Name:	D (X) Change () Addition BLOCK, ERIN	

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.

Address:

17481 MARCY AVE

City-St-Zip: PT CHARLOTTE, FL 33948

SIGNATURE: LYNDSEY MORTON PD 07/16/2008