Current Mai	iling Address:			
PO BOX 703				
HAINES CIT	Y, FL 33845 US			
El Number	r: 30-0790056		Certificate of Status De	sired: No
lame and A	Address of Current Registered Agent	t:		
	1.0			
82 AMERICAN	NA COURT			
82 AMERICAN	NA COURT			
82 AMERICAN ISSIMMEE, FI	NA COURT	ging its registered office or regis	tered agent, or both, in the State of F	-lorida.
82 AMERICAN ISSIMMEE, Fl	NA COURT L 34758 US	ging its registered office or regis	tered agent, or both, in the State of F	
82 AMERICAN ISSIMMEE, Fl	NA COURT L 34758 US d entity submits this statement for the purpose of chan	ging its registered office or regis	tered agent, or both, in the State of F	Florida. 03/18/20 Date
SIGNATURE	NA COURT L 34758 US d entity submits this statement for the purpose of chang E: ROLLE FELICIA	ging its registered office or regis	tered agent, or both, in the State of F	03/18/20
82 AMERICAN ISSIMMEE, FI The above named SIGNATURE	NA COURT L 34758 US d entity submits this statement for the purpose of changes E: ROLLE FELICIA Electronic Signature of Registered Agent	ging its registered office or regis	tered agent, or both, in the State of F	03/18/20
82 AMERICAN ISSIMMEE, FI The above named SIGNATURE Officer/Dire	NA COURT L 34758 US d entity submits this statement for the purpose of changes E: ROLLE FELICIA Electronic Signature of Registered Agent ctor Detail :			03/18/20
82 AMERICAN ISSIMMEE, FI The above name SIGNATURE	NA COURT L 34758 US d entity submits this statement for the purpose of changes E: ROLLE FELICIA Electronic Signature of Registered Agent ctor Detail : D	Title	S	03/18/20

I hereby 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 all other like empowered.

SIGNATURE: FELICIA ROLLE

SECRETARY

03/18/2024

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N13000011115

Entity Name: A C O J OUTREACH CENTER INC

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

1103 AVENUE F

FILED Mar 18, 2024 **Secretary of State**

6595680510CC

Date