| 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.   |

PRESIDENT

SIGNATURE: IZETT R. SCOTT

Electronic Signature of Signing Officer/Director Detail

# **Current Mailing Address:** PO BOX 590008

FORT LAUDERDALE, FL 33359

**Current Principal Place of Business:** 

### FEI Number: 99-0829149

3280 NORTH STATE ROAD 7 LAUDERDALE LAKES, FL 33319

### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

SCOTT, IZETT R 2915 NW 87TH TERRACE CORAL SPRINGS, FL 33065 US

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:

# **Officer/Director Detail :**

| Title           | P                        | Title           | S                         |  |
|-----------------|--------------------------|-----------------|---------------------------|--|
| Name            | SCOTT, IZETT R           | Name            | WATKINS, NORMA            |  |
| Address         | 2915 NW 87TH TERRACE     | Address         | 4701 NW 42ND STREET       |  |
| City-State-Zip: | CORAL SPRINGS FL 33065   | City-State-Zip: | LAUDERDALE LAKES FL 33319 |  |
| Title           | D                        | Title           | D                         |  |
| Name            | LYNCH, MABEL             | Name            | BECKLESS, SINCLAIR        |  |
| Address         | P.O BOX 590008           | Address         | P.O BOX 590008            |  |
| City-State-Zip: | FORT LAUDERDALE FL 33359 | City-State-Zip: | FORT LAUDERDALE FL 33359  |  |
| Title           | D                        |                 |                           |  |
| Name            | MORRISON, KAREN          |                 |                           |  |
| Address         | P.O BOX 590008           |                 |                           |  |
| City-State-Zip: | FORT LAUDERDALE FL 33359 |                 |                           |  |
|                 |                          |                 |                           |  |

## DOCUMENT# N2300009907 Entity Name: UNITED OUTREACH FOR ALL PEOPLE INC

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Certificate of Status Desired: No

04/03/2024

Date

Date

### FILED Apr 03, 2024 Secretary of State 5899189310CC