## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003831

Entity Name: NEVUS OUTREACH, INC.

**Current Principal Place of Business:** 

361 SOUTHWEST DRIVE #353 JONESBORO, AR 72404

**Current Mailing Address:** 

361 SOUTHWEST DRIVE #353 JONESBORO, AR 72404 US

FEI Number: 59-3455128 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOWERS, WIATT FREDRICK 303 E CHURCH STREET JACKSONVILLE, FL 32202 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: WIATT BOWERS 04/30/2024

Electronic Signature of Registered Agent

Officer/Director Detail:

Address

Title CEO Title **SECRETARY** 

ISBELL, LAUREN PHILLIPS, CRISTY Name Name

> Address 777 CARROLL ST

JONESBORO AR 72404 City-State-Zip:

361 SOUTHWEST DRIVE #353

City-State-Zip: BROOKLYN NY 11215-1472

Title **TREASURER** 

Title **ELDER** HOLMES, OLIVER Name

Name O'BRYAN, LISA Address 415 ROCKING CHAIR LN

16561 S LAWSON ST Address City-State-Zip: FORT MILL SC 29708

City-State-Zip: OLATHE KS 66062

**ELDER** Title

Title CHAIRMAN, VC BISCHOFF, ANDREA Name Name BOWERS, WIATT Address

3828 LYTLE RD Address 303 E CHURCH ST

WAYNESVILLE OH 45068 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32202-2725

Title **CHAIR** Title **ELDER** 

CONNORS, JENNA Name MAGGIE, MANGOLD Name

Address 15 TRUE LN Address 107 SCENIC DR

GEORGETOWN MA 01833-2500 City-State-Zip: City-State-Zip: VINTON IA 52349-2362

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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.

04/30/2024 CEO SIGNATURE: ISBELL, LAUREN

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Apr 30, 2024

**Secretary of State** 

8696733363CC

Date

## Officer/Director Detail Continued:

Title ELDER

Name ROGERS, MATTHEW

9202 LEGLER CIR APT 384 Address

City-State-Zip: LENEXA KS 66219