## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#733162**

FILED Apr 29, 2008 Secretary of State

Entity Name: THE NEIGHBORHOOD OUTREACH, INC.

Current Principal Place of Business: New Principal Place of Business:

13900 NW 7 AVE. 1059 NW 119TH STREET

MIAMI, FL 33168 MIAMI, FL 33168

Current Mailing Address: New Mailing Address:

13900 NW 7 AVE. 1059 NW 119TH STREET

MIAMI, FL 33168 MIAM, FL 33168

FEI Number: 59-1643377 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCOTT, HULLIE M SCOTT, HULLIE M 1059

MIAMI, FL 33168 US MIAMI, FL 33168 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: DR HULLIE M. SCOTT 04/29/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete Title: P/D (X) Change ( ) Addition

 Name:
 SCOTT, HULLIE MAE,
 Name:
 SCOTT, HULLIE MAE,

 Address:
 13900 NW 7 AVE.
 Address:
 1059 NW 119TH STREET

 City-St-Zip:
 MIAMI, FL 33168
 City-St-Zip:
 MIAMI, FL 33168

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BALLARD, ANDREA S.,
 Name:

 Address:
 4101 N W 190TH STREET
 Address:

 City-St-Zip:
 MIAMI GARDENS, FL 33055
 City-St-Zip:

Title: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PRIDGEN, CATHERINE,
 Name:

 Address:
 2841 NW 173RD TERR
 Address:

 City-St-Zip:
 MIAMI GARDENS, FL 33056
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 ROZIER -BALLARD, CHR, ISTINE
 Name:

 Address:
 17400 NW 46TH AVENUE
 Address:

 City-St-Zip:
 MIAMI GARDENS, FL 33055
 City-St-Zip:

Title: VP/D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ANDERSON, CHERYL S.,
 Name:

 Address:
 3441 NW 173RD TERR
 Address:

 City-St-Zip:
 MIAMI GARDENS, FL 33055
 City-St-Zip:

Title: VP/D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ANDERSON, THOMAS,
 Name:

 Address:
 3441 N W 173TH TERR
 Address:

 City-St-Zip:
 MIAMI GARDENS, FL 33055
 City-St-Zip:

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.

SIGNATURE: HULLIE MAE SCOTT P/D 04/29/2008

Electronic Signature of Signing Officer or Director

Date