

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 18, 2008
Secretary of State

DOCUMENT# F06000002362

Entity Name: SECOND CHANCE OUTREACH CENTER, INCORPORATED**Current Principal Place of Business:**1359 EDGEWOOD AVE
DOUGLAS, GA 315334543**New Principal Place of Business:****Current Mailing Address:**15400 NW 18TH AVE
MIAMI, FL 33054**New Mailing Address:****FEI Number:** 20-3050783**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BROCK, PRESTON
15400 NW 18TH AVE
MIAMI, FL 33054 US**Name and Address of New Registered Agent:**DAVIS, TRAVIS
15400 NW 18TH AVE
MIAMI, FL 33054 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: TRAVIS DAVIS

11/18/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: BROCK, PRESTON
Address: 15400 NW 18TH AVE
City-St-Zip: MIAMI, FL 33054

Title: VCVT () Delete
Name: LOTT, YVONNE
Address: 1359 EDGEWOOD AVE
City-St-Zip: DOUGLAS, GA 315334543

Title: D () Delete
Name: BROWN, GREGORY C
Address: 7335 WOOD DUCK RD
City-St-Zip: JACKSONVILLE, FL 32244

Title: D () Delete
Name: HANCOCK, MARCUS
Address: 153 IVY LAKE CIR
City-St-Zip: DOUGLAS, GA 31533

Title: S () Delete
Name: PEARSON, OLIVIA
Address: 614 ALTHEA RD
City-St-Zip: OCILLA, GA 31774

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: DAVIS, TRAVIS
Address: 15400 NW 18TH AVE
City-St-Zip: MIAMI, FL 33054

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: DAVIS, TRAVIS
Address: 2328 NW 60 ST
City-St-Zip: MIAMI, FL 33142

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: TRAVIS DAVIS

DIR

11/18/2008

Electronic Signature of Signing Officer or Director

Date