2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001702

FILED Jun 10, 2009 Secretary of State

Entity Name: ALEXANDER COMMUNITY OUTREACH CENTER INC

Entity Nam	e: ALEXANDER COMMUNITY OUTREACH CENT	ER, INC.	
Current Principal Place of Business:		New Principal Place of Business:	
	21ST STREET DERDALE, FL 33311		
Current Mailing Address:		New Mailing Address:	
3001 N.W.21ST STREET FORT LAUDERDALE, FL 33311			
	e with s. 607.193(2)(b), F.S., the corporation did not receive	' - '	e.
	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
3001 N.W.2	ER, LORRAINE M 21ST STREET DERDALE, FL 33311 US		
The above in the State	named entity submits this statement for the purpose of Florida.	of changing i	ts registered office or registered agent, or both,
SIGNATUR			
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete ALEXANDER, LORRAINE M 3001 N.W.21ST STREET FORT LAUDERDALE, FL 33311	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SD () Delete ALEXANDER, ROBIN 3001 N.W.21ST STREET FORT LAUDERDALE, FL 33311	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD () Delete LAWTON, MELISSA 1117 S.W. 22 TERRANCE FORT LAUDERDALE, FL 33312	Title: Name: Address: City-St-Zip:	TD (X) Change () Addition LAWTON, MELISSA 1721 NW 27TH TERRACE FORT LAUDERDALE, FL 33311
Title: Name: Address: City-St-Zip:	D () Delete ALEXANDER, JANDRA 3001 NW 21ST STREET FT. LAUDERDALE, FL 33311	Title: Name: Address: City-St-Zip:	() Change () Addition

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: ROBIN ALEXANDER SD 06/10/2009