

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003398

FILED  
Apr 29, 2007  
Secretary of State

Entity Name: PEOPLE REACHING OUT, INC.

## Current Principal Place of Business:

14070 E J PAIGE ROAD  
SANDERSON, FL 32087

## New Principal Place of Business:

## Current Mailing Address:

14070 E J PAIGE ROAD  
SANDERSON, FL 32087

## New Mailing Address:

FEI Number: 59-3636761

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEWIS, JOANN H  
14070 E J PAIGE ROAD  
SANDERSON, FL 32087 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: RENTZ, ISHMAEL  
Address: 6807 NW 37TH PLACE  
City-St-Zip: GAINESVILLE, FL 32653

Title: PD ( ) Delete  
Name: LEWIS, LEONARD E  
Address: PO BOX 262  
City-St-Zip: SANDERSON, FL 32087

Title: TD ( ) Delete  
Name: WILLIAM, SYLVIA  
Address: PO BOX 32  
City-St-Zip: SANDERSON, FL 32087

Title: SD ( ) Delete  
Name: WALLACE, ALMEDA  
Address: PO BOX 368  
City-St-Zip: SANDERSON, FL 32087

Title: VD ( ) Delete  
Name: LEWIS, JOANN H  
Address: 14070 E J PAIGE ROAD  
City-St-Zip: SANDERSON, FL 32087

Title: D ( ) Delete  
Name: FADLEY, JEFFERY JD  
Address: 809 SOUTH EAST 15TH STREET  
City-St-Zip: OKEECHOBEE, FL 34974

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: LEONARD E. LEWIS

PD

04/29/2007

Electronic Signature of Signing Officer or Director

Date