

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006246

FILED
Feb 02, 2006
Secretary of State

Entity Name: WELCOME HOME OUTREACH, INC.

Current Principal Place of Business:

2825 SMU BLVD
ORLANDO, FL 32817 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 677653
ORLANDO, FL 328677653 US

New Mailing Address:

FEI Number: 59-3675104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIBARIC, LINDA A
2825 SMU BLVD
ORLANDO, FL 32817 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: JOY, KATHLEEN A
Address: 989 TILLERY WAY
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: MAISANO, DARLENE
Address: 5B56 BUSTER MORSE RD
City-St-Zip: FREEPORT, FL 32439

Title: D () Delete
Name: RIBARIC, LINDA A
Address: 2825 SMU BLVD
City-St-Zip: ORLANDO, FL 32817

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: LINDA A RIBARIC

D

02/02/2006

Electronic Signature of Signing Officer or Director

Date