

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000001122

FILED
May 15, 2002 8:00 AM
Secretary of State

Entity Name: FAMILY OUTREACH OF FLORIDA, INC.

Current Principal Place of Business:

11505 COLONY HILL DR.
SEFFNER, FL 33584

New Principal Place of Business:

Current Mailing Address:

11505 COLONY HILL DR.
SEFFNER, FL 33584

New Mailing Address:

FEI Number: 59-3696693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESTON, ALISON
11505 COLONY HILL DR.
SEFFNER, FL 33584 US

Name and Address of New Registered Agent:

MERRILL, BRUCE
11505 COLONY HILL DR.
SEFFNER, FL 33584 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: BRUCE MERRILL

05/15/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ANTRIM, DALE
Address: 8505 ANGLERS POINT DR.
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: DST () Delete
Name: PRESTON, ALISON
Address: 11531 WELLMAN DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: O'NEAL, EMILY
Address: 3407 HILLGROVE RD.
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: BRENES, WILLIAM
Address: 216 MORNINGSIDE LOOP
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MERRILL, BRUCE
Address: 6206 GASSINO PLACE
City-St-Zip: RIVERVIEW, FL 33569

Title: DST (X) Change () Addition
Name: BUTIERRIES, DAVID
Address: 1318 SILLMAN LANE
City-St-Zip: SEFFNER, FL 33584

Title: TRES (X) Change () Addition
Name: O'NEAL, TIM
Address: 3407 HILLGROVE RD.
City-St-Zip: VALRICO, FL 33594

Title: V.P. (X) Change () Addition
Name: ASBURY, GARY
Address: 6203 CANNOLI PLACE
City-St-Zip: RIVERVIEW, FL 33569

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRUCE MERRILL

PRES

05/15/2002

Electronic Signature of Signing Officer or Director

Date